

AUTO CR - LOG SUMMARY #1051500

TYPE: CR

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
	SUSTAINED	MINIOTIS, CONSTANTINE	28-AUG-2012

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	CLARK, THOMAS J			701 /	LIEUTENANT OF POLICE	M	WHI		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
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Accused Members

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
CPD Employee	Accused	WALLS, JAMES	10710		701 /	POLICE OFFICER	OFF Duty	It is reported that the accused was arrested for DUI and criminal damage to property.

Other Involved Parties

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
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Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
Reporting Party Third Party	CLARK, THOMAS J	WALLS, JAMES	NO RELATIONSHIP

Incident Details

CR Required?		Manner Incident Received?	BELL
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IAD	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:	NOTIFIED LIEUTENANT MELEAN STAR# 666 INTERNAL AFFAIRS		

Incident Category List

Incident Category	Primary?	Initial?
02D - IAD SUBCODE 02D	Y	N
02D - GROUP 02 - ALCOHOL ABUSE D.U.I. - OFF DUTY	Y	Y

Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
MARAFFINO, JOSEPH	Primary	GENERAL INVESTIGATION SECTION	01-FEB-2012	01-APR-2012	07-MAR-2012	35
PIONKE, JOSEPH	Supervisor	GENERAL INVESTIGATION SECTION	01-FEB-2012	02-MAR-2012	07-MAR-2012	

Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
MARAFFINO, JOSEPH	02-MAR-2012	01-APR-2012		OTHER (DESCRIBE)	In closing	02-MAR-2012	PIONKE, JOSEPH	06-MAR-2012	ok

Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
WALLS, JAMES	1	It is alleged that the accused officer was involved in a traffic crash on 27 January 2012 in the city of Socorro New Mexico at 0055 hours and was arrested for DUI. The accused had a BAC level of 0.15 and was subsequently arrested by the Socorro New Mexico Police Dept.	02D IAD SUBCODE 02D	ACCIDENT - PROPERTY DAMAGE	SUSTAINED

Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
CLOSED/FINAL	10-SEP-2012 06:32	LENIHAN, SUE	POLICE OFFICER	121 /	
PENDING FINANCE DIVISION RESPONSE	29-AUG-2012 06:44	LENIHAN, SUE	POLICE OFFICER	121 /	
PENDING REVIEW AFTER SUPERINTENDENT DECISION	28-AUG-2012 04:32	MINIOTIS, CONSTANTINE	SUPT'S CHIEF OF STAFF	111 /	
PENDING SUPERINTENDENT DECISION	07-AUG-2012 09:17	MAHONEY, DANIEL	PO LEGAL OFF 2	121 /	Mediation
PENDING FINANCE DIVISION RESPONSE	17-JUL-2012 10:06	LENIHAN, SUE	POLICE OFFICER	121 /	
PENDING ACCUSED APPEAL	16-JUL-2012 03:50	RIVERA, JUAN	CHIEF	121 /	
PENDING ASSISTANT DEPUTY SUPERINTENDENT REVIEW	11-JUL-2012 07:52	ROWAN, JAMES	SERGEANT OF POLICE	121 /	
PENDING ADVOCATE REVIEW	11-JUL-2012 06:37	LENIHAN, SUE	POLICE OFFICER	121 /	
PENDING REVIEW INCIDENT (I.A.D./DISTRICT USE)	23-APR-2012 10:23	KLIMAS, ROBERT	COMMANDER	121 /	
PENDING LIEUTENANT REVIEW	09-MAR-2012 03:37	MELEAN, FREDERICK	LIEUTENANT OF POLICE	121 /	
PENDING LIEUTENANT REVIEW	08-MAR-2012 12:00	MARAFFINO, JOSEPH	SERGEANT OF POLICE	121 /	
PENDING INVESTIGATIVE REVIEW	07-MAR-2012 11:58	MARAFFINO, JOSEPH	SERGEANT OF POLICE	121 /	
PENDING INVESTIGATION	01-FEB-2012 01:39	SOLIS, MARCELLA	SERGEANT OF POLICE	121 /	
PENDING ASSIGN INVESTIGATOR	01-FEB-2012 11:29	CLARK, SUSAN	LIEUTENANT OF POLICE	121 /	 Type Changed from INFO to CR on 01-FEB-2012 11:29 by CLARK, SUSAN
PENDING APPROVE TEAM	30-JAN-2012 10:26	WATSON, JOHN	POLICE OFFICER	121 /	
PENDING ASSIGN TEAM	27-JAN-2012 11:39	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	27-JAN-2012 11:20	TOPPINS, YOLANDA	INTAKE AIDE	113 /	
PRELIMINARY	27-JAN-2012 09:26	TOPPINS, YOLANDA	INTAKE AIDE	113 /	

Attachments

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	INVESTIGATION					MARAFFINO, JOSEPH	01-FEB-2012 08:59			
1	FACE SHEET					TOPPINS, YOLANDA	27-JAN-2012 09:26			
2	CONFLICT CERTIFICATION					MARAFFINO, JOSEPH	01-FEB-2012 08:59			
3	DOCUMENTS - INVESTIGATION		1		Y	MARAFFINO, JOSEPH	02-MAR-2012 06:27	APPROVED		
4	DOCUMENTS - INVESTIGATION		1		N	MARAFFINO, JOSEPH	02-MAR-2012 06:40	APPROVED		
5	DOCUMENTS - INVESTIGATION		16		Y	MARAFFINO, JOSEPH	02-MAR-2012 06:35	APPROVED		
6	DOCUMENTS - INVESTIGATION		21	Reports from City of Socorro New Mexico Police Dept.	Y	MARAFFINO, JOSEPH	02-MAR-2012 06:55	APPROVED		
7	DOCUMENTS - INVESTIGATION		1	Mediation Agreement	Y	MARAFFINO, JOSEPH	06-MAR-2012 09:29	APPROVED		
8	DOCUMENTS - INVESTIGATION		1		Y	MARAFFINO, JOSEPH	06-MAR-2012 09:29	APPROVED		
9	DOCUMENTS - INVESTIGATION		1		Y	MARAFFINO, JOSEPH	07-MAR-2012 08:23	APPROVED		
	DOCUMENTS - INVESTIGATION		6	Closing Pkg.	Y	MARAFFINO, JOSEPH	07-MAR-2012 09:02	APPROVED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
ASSISTANT DEPUTY SUPERINTENDENT REVIEW	WALLS, JAMES	SUBMITTED	RIVERA, JUAN	CHIEF	121	16-JUL-2012 03:50	
ASSISTANT ADVOCATE REVIEW		SUBMITTED	LENIHAN, SUE	POLICE OFFICER	121	11-JUL-2012 06:37	Ready for Chief Rivera's approval
LIEUTENANT REVIEW		SUBMITTED	KLIMAS, ROBERT	COMMANDER	121	23-APR-2012 10:23	OK
LIEUTENANT REVIEW		SUBMITTED	MELEAN, FREDERICK	LIEUTENANT OF POLICE	022	09-MAR-2012 03:37	
SERGEANT REVIEW		SUBMITTED	MARAFFINO, JOSEPH	SERGEANT OF POLICE	121	08-MAR-2012 12:00	

Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
ADVOCATE OFFICE CLOSING STEPS	WALLS, JAMES	SUBMITTED	LENIHAN, SUE	POLICE OFFICER	121	10-SEP-2012 06:32	ctr
FINANCE DIVISION RESPONSE	WALLS, JAMES	SUBMITTED	DAVIS, TERI	SR DATA ENTRY OPR	122	05-SEP-2012 12:35	
REVIEW AFTER SUPERINTENDENT DECISION	WALLS, JAMES	SUBMITTED	LENIHAN, SUE	POLICE OFFICER	121	29-AUG-2012 06:44	Corrected Status
SUPERINTENDENT DECISION	WALLS, JAMES	SUBMITTED	MINIOTIS, CONSTANTINE	SUPT'S CHIEF OF STAFF	111	28-AUG-2012 04:32	At the direction of the Superintendent
FINANCE DIVISION RESPONSE	WALLS, JAMES	SUBMITTED	DAVIS, TERI	SR DATA ENTRY OPR	122	26-JUL-2012 09:14	
FINANCE DIVISION RESPONSE	WALLS, JAMES	ACCEPTED/SAVED	DAVIS, TERI	SR DATA ENTRY OPR	122	26-JUL-2012 09:07	Recieved signed Notification back from Unit with dates assigned
FINANCE DIVISION RESPONSE	WALLS, JAMES	ACCEPTED/SAVED	DAVIS, TERI	SR DATA ENTRY OPR	122	23-JUL-2012 10:02	Mailed Notification with dates assigned to Unit C/O
ADVOCATE OFFICE ACCUSED REVIEW	WALLS, JAMES	SUBMITTED	LENIHAN, SUE	POLICE OFFICER	121	17-JUL-2012 10:06	
ADVOCATE OFFICE ACCUSED REVIEW	WALLS, JAMES	SUBMITTED	ROWAN, JAMES	SERGEANT OF POLICE	121	17-JUL-2012 09:52	
ADVOCATE REVIEW	WALLS, JAMES	SUBMITTED	ROWAN, JAMES	SERGEANT OF POLICE	121	11-JUL-2012 07:52	

Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
WALLS, JAMES	1. It is alleged that the accused officer was involved in a tra...	MINIOTIS, CONSTANTINE	28-AUG-2012 04:32			SUSTAINED	
WALLS, JAMES	1. It is alleged that the accused officer was involved in a tra...	RIVERA, JUAN	16-JUL-2012 03:50		Y	SUSTAINED	
WALLS, JAMES	1. It is alleged that the accused officer was involved in a tra...	MARAFFINO, JOSEPH	07-MAR-2012 11:58	Y		NOT SUSTAINED	
WALLS, JAMES	1. It is alleged that the accused officer was involved in a tra...	MARAFFINO, JOSEPH	07-MAR-2012 11:58			SUSTAINED	

Accused Finding History

Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
WALLS, JAMES	MINIOTIS, CONSTANTINE	28-AUG-2012 04:32			SUSPENSION 20 Day(s)	
WALLS, JAMES	RIVERA, JUAN	16-JUL-2012 03:50		Y	SUSPENSION 20 Day(s)	
WALLS, JAMES	MARAFFINO, JOSEPH	08-MAR-2012 12:00			SUSPENSION 20 Day(s)	

Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
WALLS, JAMES	It is alleged that the accused officer was involved in a traffic crash on 27 January 2012 in the city of Socorro New Mexico at 0055 hours and was arrested for DUI. The accused had a BAC level of 0.15 and was subsequently arrested by the Socorro New Mexico Police Dept.	02D IAD SUBCODE 02D		SUSTAINED	

FACE SHEET (Notification Date: 27-JAN-2012) - LOG #1051500

TYPE: CR

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	CLARK, THOMAS J			701 /	LIEUTENANT OF POLICE	M	WHI		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
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Accused Members

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
CPD Employee	Accused	WALLS, JAMES	10710		701 /	POLICE OFFICER	OFF Duty	It is reported that the accused was arrested for DUI and criminal damage to property.

Incident Details

CR Required?		Manner Incident Received?	BELL
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IAD	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
02D - IAD SUBCODE 02D	Y
02D - GROUP 02 - ALCOHOL ABUSE D.U.I. - OFF DUTY	Y

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IAD	GENERAL INVESTIGATION SECTION	PIONKE, JOSEPH (SUPERVISOR)	01-FEB-2012 13:39	SOLIS, MARCELLA	
IAD	GENERAL INVESTIGATION SECTION	MARAFFINO, JOSEPH (PRIMARY INV)	01-FEB-2012 13:39	SOLIS, MARCELLA	
IAD	GENERAL INVESTIGATION SECTION	-	30-JAN-2012 10:26	WATSON, JOHN	
IAD	INTERNAL AFFAIRS DIVISION	-	27-JAN-2012 09:26	TOPPINS, YOLANDA	

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PENDING ADVOCATE REVIEW	11-JUL-2012 06:37	LENIHAN, SUE	POLICE OFFICER	121 /	
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PENDING INVESTIGATIVE REVIEW	07-MAR-2012 11:58	MARAFFINO, JOSEPH	SERGEANT OF POLICE	121 /	
PENDING INVESTIGATION	01-FEB-2012 01:39	SOLIS, MARCELLA	SERGEANT OF POLICE	121 /	
PENDING ASSIGN INVESTIGATOR	01-FEB-2012 11:29	CLARK, SUSAN	LIEUTENANT OF POLICE	121 /	 Type Changed from INFO to CR on 01-FEB-2012 11:29 by CLARK, SUSAN
PENDING APPROVE TEAM	30-JAN-2012 10:26	WATSON, JOHN	POLICE OFFICER	121 /	
PENDING ASSIGN TEAM	27-JAN-2012 11:39	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	27-JAN-2012 11:20	TOPPINS, YOLANDA	INTAKE AIDE	113 /	
PRELIMINARY	27-JAN-2012 09:26	TOPPINS, YOLANDA	INTAKE AIDE	113 /	

SWORN AFFIDAVIT FOR COMPLAINT LOG INVESTIGATION
CHICAGO POLICE DEPARTMENT

STATE OF ILLINOIS)
)
COUNTY OF COOK) CC

Location of Incident	Date	Time
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Summary of Statement(s):

I, _____ hereby state as follows:

1. I have read the above summary and/or attached statement(s) in its entirety, reviewed it for accuracy and been given an opportunity to make corrections and additions to the statement(s).
2. Under penalties as provided by law pursuant to 735 ILCS 5/1-109, I certify that the information set forth in the statement(s) above and/or attached summary are true and correct, except as to any matters therein stated to be on information and belief as to such matters, I certify as aforesaid that I verily believe the same to be true.

Print Affiant's Name

Print Witness's Name

Affiant's Signature

Witness's Signature

Date

Date

Bureau of Patrol
Public Transportation Section

27 JAN 2012

To : Commander John Graeber
Public Transportation Section

From : Lt. Thomas J. Clark #270
Public Transportation Section

Subject : Initiation - CL# 1051 500

Allegation : Driving While Under the Influence
Damage to Property

Complainant : City of Socorro, NM


Accused : P.O. WALLS, James D. #10710, assigned 1st Watch Unit 701

Date & Time : 26 JAN 12 approximately 2230 hrs

Location : [REDACTED]

Notifications : Inv. Toppins, employee # [REDACTED] @ 923 hrs.
Lt. Melean #666, Internal Affairs Division

History : On today's date at approximately 0845 hrs R/Lt received a phone call from P.O. WALLS #10710. WALLS related that he is currently in [REDACTED] and was involved in a property damage traffic crash. WALLS explained that he became distracted while making a turn and struck a street light. WALLS stayed on scene and was arrested on suspicion of driving under the influence and property damage. Upon his release, WALLS made the required notification to R/Lt at Public Transportation Unit 701. R/Lt made the appropriate notifications to I.A.D. and IPRA and CL# 1051 500 was issued at 0923 hrs.


Lt. Thomas J. Clark #270

Approved:

INVESTIGATIONS DIVISION
General Investigations Section

01 FEB 2012
CL #1051500

TO: Juan RIVERA – Bureau Chief
Bureau of Internal Affairs

FROM: Sergeant Terrance COCHRAN Star #894
General Investigations Section
Investigations Division

SUBJECT: Supplemental Synoptic Report for CL #1051500
(Current Active Chicago Police Officer is accused of misconduct)

ALLEGATIONS: Out of State D.U.I. Arrest

ACCUSED: Police Officer James O. WALLS Star #10710 / Employee # [REDACTED] /
Date of Birth [REDACTED] Date of Appointment: 14 AUG 2000 /
Assigned to Unit 701 (Public Transportation Section)

DATE / TIME /
LOCATION OF STRIP: 01 FEB 2012 2247 Hours [REDACTED]
(Internal Affairs Offices)

NOTIFICATIONS: Sergeant Dawn PECORARO Star #1285 – 1st Watch / Beat 7340
(For Mass Transit Unit Commander's Office)

IN SUMMARY: The Reporting Sergeant was given information by the Director of Investigations, Robert KLIMAS of this command, in reference to locating Police Officer James WALLS Star #10710, who is assigned to the 1st Watch in Unit 701 (Public Transportation Section). It was conveyed, the involved Department member was to be relieved of his police powers. This Officer is accused of misconduct.

It was learned from MTS Commander John GRAEBER that Officer WALLS was coming back from his Days-Off and scheduled to work his regular midnight shift in his Unit for 02 FEB 2012. The Undersigned spoke with the Unit #701 Executive Officer Hootan BAHMANDEJI, who confirmed that Officer WALLS was on the schedule to work Beat 7363 starting at 2130 Hours. Arrangements were made to have Officer WALLS escorted to the Internal Affairs Offices, after Roll Call.

1st Watch Beat 7340, Sergeant Dawn PECORARO Star #1285 came to Headquarters with Officer WALLS on today's date. After his arrival at IAD, Officer WALLS was presented with his Notification of Duty Restrictions and related paperwork. He acknowledged that he was no longer able to carry a firearm and did not have one on his person. A check of the I-CLEAR Data Warehouse Firearms records revealed Officer WALLS has two (2) registered weapons.

CL # 1051500
Attachment # _____
Page 1 of 16

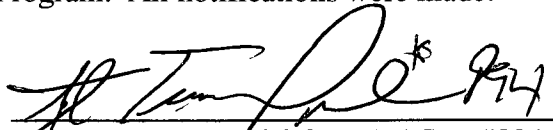
1 of 2

INVESTIGATIONS DIVISION
General Investigations Section

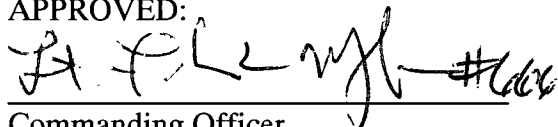
01 FEB 2012
CL #1051500

(Continuation of Narrative - Page #2 of 2)

Officer WALLS was informed of the procedure to cover any pending court dates. The Accused Officer turned over his Star #10710, Hat Shield #10710 and Police Identification card. He was given an Equipment Transaction Receipt for the surrendered property. The Officer was instructed to return to the Internal Affairs Offices on 02 FEB 2012 at 1000 Hours for re-assignment and issuance of his Temporary Identification card. He was also directed to bring any and all original Bond slip / citations / court documents that he was given stemming from the incident which precipitated this CL number. Officer WALLS was given paperwork for the Employee Assistance Program. All notifications were made.


Sergeant Terrance COCHRAN Star #894
General Investigations Section
Investigations Division

APPROVED:



Commanding Officer
General Investigations Section
Investigations Division

CL # _____
Attachment # _____
Page _____ of _____

2 of 2



There are currently 808 users online.

30 January 2012 5:35:05 PM

CLEAR Data Warehouse
Personnel Check Sorted by Name
For All Units
Report Date= 1/30/2012 Requested By= [REDACTED]

LAST	FIRST	MI	SEX	RACE	BIRTH DATE	AGE	EMPL #	HGT	WGT	TITLE	APPTMT DATE	CON SRVC DT	SENRITY DT	YOU	IDIST	STAR	ASGN DTL	WATCH	LOGON ID	EMPL TYPE
WALLS	JAMES	D	M	BLK	[REDACTED]	43	[REDACTED]	509	169	9161	14-AUG-2000	14-AUG-2000	14-AUG-2000	11	022	10710	701	1	[REDACTED]	P

This results table currently has 1 records in it.
 For Official Police Use Only! Not For Dissemination!

CL #
 Attachment
 Page 07

NOTIFICATION OF DUTY RESTRICTIONS

CHICAGO POLICE DEPARTMENT

DATE 01 FEB 2012

TO: NAME OF MEMBER RANK STAR NO. EMPLOYEE NO. UNIT OF ASSIGNMENT
 JAMES D. WALLS P.O. 10210 [REDACTED] 701
 COMMANDING OFFICER OF MEMBER UNIT
 COMMANDER JOHN GRAEBER 701 Public Transportation Section
 FROM: CHIEF, INTERNAL AFFAIRS DIVISION

Pending the conclusion of the investigation of this Complaint Log Number and based on the authority vested in me by the Superintendent of Police, you are hereby directed and expressly ordered by me as follows:

(CHECK APPLICABLE BOX(ES) AND HAVE THE ACCUSED INITIAL IN THE SPACE FOLLOWING EACH BOX)

- ☒ JMW 1. You are not to carry a firearm or any other weapon.
- ☒ DNA 2. If so ordered by the courts to surrender firearms, it is your responsibility to immediately make arrangements to surrender any firearms in your possession.
- ☒ JMW 3. You are not to exercise the power of arrest or any other police power bestowed upon you by virtue of your employment as a sworn member of the Chicago Police Department.
- ☒ JMW 4. You are to surrender your Chicago Police Star, Shield and Identification Card as directed.
- ☒ JMW 5. You are not to drive or operate any Departmental Transportation Equipment which will include but not be limited to: motor vehicle, watercraft, bicycle, or any electronic powered transportation equipment except as directed by your Commanding Officer.
- ☒ JMW 6. You are not to attend or testify in any court in the capacity of a Chicago Police Officer unless subpoenaed.
- ☒ JMW 7. You are to obey any orders given by any supervisor of the Chicago Police Department.
- ☒ DNA 8. If incarcerated or held over to bond you will be carried in a no-pay status until you notify your unit of assignment of your choice to use elective or compensatory time.
- ☒ JMW 9. You will report to (unit) IA on 02 FEB, 2012 at 1400 (hours) as ordered.
- ☒ JMW 10. For re-assignment & temp I.D. CARD. MUST BRING ORIGINAL COURT PAPERS/ BOND SUP/ CITATIONS WITH YOU.

NOTE: These duty restrictions do NOT relieve you of your court appearance responsibilities regarding your inability to attend court as set forth in the appropriate Department directives. In addition, you are to notify your Commanding Officer of any forthcoming court appearance, Grand Jury hearing or other governmental hearing in which you are the complainant or a witness or otherwise required to testify.

This order will continue until further notice. Violation of this order will subject you to disciplinary action and may be used as the basis to bring charges against you seeking separation.

I, JAMES WALLS, acknowledge having received the above stated order given by Sgt. TERRANCE COCHKAN #8994 on 2-1-12 at 2247 (DATE) (TIME).
 WITNESS: [Signature] #8994 SIGNATURE: James Walls

TO COMMANDING OFFICER OF ABOVE MEMBER: This is to inform you that the above listed Department member currently assigned to your command has been relieved of Police powers. The above listed restrictions have been placed on the member and will remain in effect until further notice.

All supervisors of your command will be informed of the restrictions and will take immediate action if violations are noted. If the member is transferred or detailed to another unit within the Department, immediate notification will be made to the Internal Affairs Division at 745 - 6125, PAX 0602.

NOTE: When a member notifies you of a forthcoming appearance in court, at a Grand Jury hearing or other governmental hearing as a complainant or witness, it will be your responsibility to notify the appropriate attorney of the member's duty restrictions and duty status.

PREPARE IN TRIPLICATE
 Original to Investigator's file.
 Copy to accused member.
 Copy to Commanding Officer.

RECEIVED NAME	RANK	COMPLAINT LOG NO.
DATE	TIME	CL# 1051500
		ATTACHMENT NO.
		Page

EQUIPMENT TRANSACTION RECEIPT

PERSONNEL DIVISION/CHICAGO POLICE DEPARTMENT

DATE

01 FEB 2012

FOR PERSONNEL DIVISION USE ONLY

NAME (LAST - FIRST - M.I.)

WALLS, JAMES, D.

UNIT NO.

701

EMPLOYEE NO.

SOCIAL SECURITY NO.

D - N - A -

RANK

P.O.

STAR

10710

TYPE OF EQUIPMENT
(CHECK ONE)

☒ SWORN

☐ EXEMPT

☐ CROSSING GUARD

☐ TRAFFIC CONTROL AIDE

☐ OPS

☐ OTHER (EXPLAIN)

TYPE OF EQUIPMENT RETURNED
(CHECK ALL THAT APPLY)

☒ STAR (SERIAL NO.)

10710

☒ SHIELD (SERIAL NO.)

10710

☐ HELMET (SERIAL NO.)

☒ IDENTIFICATION CARD

for P.O. WALLS

☐ BADGE (SERIAL NO.)

☐ OTHER (SPECIFY)

TYPE OF TRANSACTION (CHECK ALL THAT APPLY):

☐ LOST STAR NEW NO. SERIAL

☐ STOLEN STAR NEW NO. SERIAL

☐ RECOVERED STAR NO. SERIAL

☐ LOST BADGE NEW NO. SERIAL

☐ RETIREMENT

☐ DAMAGED NEW NO. SERIAL

☐ RETURN TO DUTY

☐ EXCHANGE NEW NO. SERIAL

☐ LOST SHIELD NEW NO. SERIAL

☐ STOLEN SHIELD NEW NO. SERIAL

☐ RECOVERED SHIELD NO. SERIAL

☐ STOLEN BADGE NEW NO. SERIAL

☐ RETIREMENT STAR ISSUED YES OR NO SERIAL

☐ RESIGNATION

☐ PROMOTION NEW NO. SERIAL

☐ OTHER (EXPLAIN)

EQUIPMENT TO BE PLACED ON HOLD FOR: (CHECK ONE)

☐ DPR

☐ LEAVE OF ABSENCE

☐ PAB

☒ ADMINISTRATIVE HOLD INTERNAL AFFAIRS

COMMENTS

RELIEVED OF POLICE POWERS PER BUREAU CHIEF JUAN RIVERT
PENDING THE CONCLUSION OF THE INVESTIGATION INTO CL#1051500
MUST REPORT TO INTERNAL AFFAIRS ON 02 FEB 2012 AT
1000 HRS WITH BOND SLIP & ANY ADDITIONAL COURT PAPERS
RELATED TO 26 JAN 2012 INCIDENTS IN SOCORRO N.W.
& FOR T&P ID & RE-ASSIGNMENT

EQUIPMENT RETURNED BY: (PRINT NAME)

JAMES WALLS #10710

(SIGNATURE)

James Walls #10710

DATE/TIME

2-1-12/2257

UNIT NO.

701

EQUIPMENT RECEIVED BY: (PRINT NAME)

Sgt. James Cochran #894

(SIGNATURE)

Sgt. James Cochran #894

DATE/TIME

01 FEB 2012/1257

UNIT NO.

121

EQUIPMENT RECEIVED BY PERSONNEL DIVISION: (PRINT NAME)

(SIGNATURE)

DATE/TIME

EQUIPMENT ISSUED BY PERSONEL DIVISION: (PRINT NAME)

(SIGNATURE)

DATE/TIME

THIS SECTION IS TO BE COMPLETED ONLY WHEN EQUIPMENT IS LOST, STOLEN OR RECOVERED.

R.D. NO.

CLASSIFICATION

IUCR

DATE OF REPORT

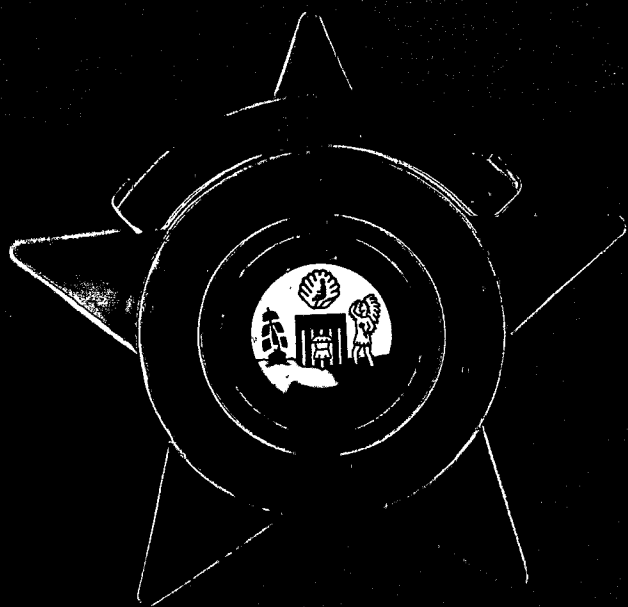
COS MESSAGE NO.

DISTRICT OF OCCURRENCE

WHERE, IF NOT CHICAGO

CLASSIFICATION

CL#
Attachment
REPORT NO.
Page




[Home](#)
[Print](#)
[Logout](#)

CPD 0064287

Home » Firearm Registration

Name: WALLS, JAMES

Firearm Registration

Applicant Information

Print Card No.

CFP No.

CFP Status

Last Name WALLS

First Name JAMES

MID

Suffix

Birthdate

Driver License No.

State IL

Race BLACK

Sex MALE

Vacate Code

Vacate Date

US Citizen? []

Organization No Non CPD Sworn No CPD Sworn Yes Convicted of Felony No

Residence

South

Phone No.

Beat

Select Printer

Business

East

2212

Label 1

Registered Firearms

Registration No	Serial No	Firearm Make	Firearm Model	Firearm Type	Caliber	Barrel Length	Firearm Status
		SMITH & WESSON	5943	PISTOL	9	5	REGISTERED
		SMITH & WESSON	3953	PISTOL	9	4	TRANSFER OUT-THIS REGISTRATION IS INACTIVE
		RUGER	LCP	PISTOL	380	2.5	REGISTERED

1-3

Attachments

CL #
Attachm
Page

BUREAU OF INTERNAL AFFAIRS


DATE: 2 FEB 2012

TO: Tracey Ladner
Director
Human Resources Division

FROM: Juan J. Rivera
Chief
Bureau of Internal Affairs

SUBJECT: DUTY STATUS

JAMES O. WALLS has/does not have a
WEAPONS restriction under CL# 1051500, therefore I
recommend that the above listed member be placed in a PAID / NO-PAY STATUS.


Juan J. Rivera
Chief
Bureau of Internal Affairs

CL# 1051500

ATTACHMENT: _____

CL # _____
Attachment _____
Page _____

EQUIPMENT TRANSACTION RECEIPT

PERSONNEL DIVISION/CHICAGO POLICE DEPARTMENT

DATE

01 FEB 2012

FOR PERSONNEL DIVISION USE ONLY

NAME (LAST - FIRST - M.I.)

WALLS JAMES D.

UNIT NO.

701

EMPLOYEE NO.

SOCIAL SECURITY NO.

D - N - A -

RANK

P.O.

STAR

10710

TYPE OF EQUIPMENT
(CHECK ONE)☒ SWORN☐ EXEMPT☐ CROSSING GUARD☐ TRAFFIC CONTROL AIDE☐ OPS☐ OTHER (EXPLAIN)TYPE OF EQUIPMENT RETURNED
(CHECK ALL THAT APPLY)☒ STAR (SERIAL NO.)

10710

☒ SHIELD (SERIAL NO.)

10710

☐ HELMET (SERIAL NO.)☒ IDENTIFICATION CARD

for P.O. WALLS

☐ BADGE (SERIAL NO.)☐ OTHER (SPECIFY)

TYPE OF TRANSACTION (CHECK ALL THAT APPLY):

☐ LOST STAR NEW NO. SERIAL☐ STOLEN STAR NEW NO. SERIAL☐ RECOVERED STAR NO. SERIAL☐ LOST BADGE NEW NO. SERIAL☐ RETIREMENT☐ DAMAGED NEW NO. SERIAL☐ RETURN TO DUTY☐ EXCHANGE NEW NO. SERIAL☐ LOST SHIELD NEW NO. SERIAL☐ STOLEN SHIELD NEW NO. SERIAL☐ RECOVERED SHIELD NO. SERIAL☐ STOLEN BADGE NEW NO. SERIAL☐ RETIREMENT STAR ISSUED YES OR NO SERIAL☐ RESIGNATION☐ PROMOTION NEW NO. SERIAL☐ OTHER (EXPLAIN)

EQUIPMENT TO BE PLACED ON HOLD FOR: (CHECK ONE)

☐ DPR☐ LEAVE OF ABSENCE☐ PAB☒ ADMINISTRATIVE HOLD

INTERNAL AFFAIRS

COMMENTS

RELINQUISHED OF POLICE POWERS PER BUREAU CHIEF JUAN RIVERA
PENDING THE CONCLUSION OF HIS INVESTIGATION INTO C# 1051500
MUST REPORT TO INTERNAL AFFAIRS ON 02 FEB 2012 AT
1000 HRS WITH BOND SLIP & ANY ADDITIONAL COURT PAPERS
RELATED TO 26 JAN 2012 INCIDENT IN SOCORRO N.W.
& FOR TEMP ID & RE-ASSIGNMENT

EQUIPMENT RETURNED BY: (PRINT NAME)

JAMES WALLS #10710

(SIGNATURE)

James Walls #10710

DATE/TIME

2-1-12/2257

UNIT NO.

701

EQUIPMENT RECEIVED BY: (PRINT NAME)

Sgt. Tanaka Cochran #84

(SIGNATURE)

Sgt. Tanaka Cochran #84

DATE/TIME

01-02-2012/2257

UNIT NO.

121

EQUIPMENT RECEIVED BY PERSONNEL DIVISION: (PRINT NAME)

M. MEYER

(SIGNATURE)

M. Meyer

DATE/TIME

2 Feb. 12

EQUIPMENT ISSUED BY PERSONEL DIVISION: (PRINT NAME)

(SIGNATURE)

DATE/TIME

THIS SECTION IS TO BE COMPLETED ONLY WHEN EQUIPMENT IS LOST, STOLEN OR RECOVERED.

R.D. NO.

CLASSIFICATION

IUCR

DATE OF REPORT

COS MESSAGE NO.

DISTRICT OF OCCURRENCE

WHERE, IF NOT CHICAGO

CLASSIFICATION

CL #

REPORT NO.

Attach

Page

2032917 3



MICROFILM NUMBER, DO NOT WRITE, STAPLE OR PUNCH ABOVE THIS LINE
STATE OF NEW MEXICO
COUNTY OF: Socorro COUNTY CODE: 25A03 DWI CITATION
CITY OF: Socorro MVD-10811
REV. 04/05

NAME (LAST)		NAME (FIRST)		(M.I.)	
WALLS		JAMES		A	
ADDRESS					
CITY <u>Chicago</u> STATE <u>IL</u> ZIP CODE <u>60643</u>					
DATE OF BIRTH		EXPIRES		CLASS ENDORSEMENTS	
[REDACTED]		6-11-14		DM NONE	
AGE		SEX		HEIGHT	
43		M		5'0	
WEIGHT		WT		SOCIAL SECURITY NUMBER	
185		185		[REDACTED]	
TYPE		STATE		LICENSE PLATE NUMBER	
40		NU		[REDACTED]	
VEH		COND.		CITATION	
COLOR		YEAR		MAKE/MODEL	
SL		12		MITS	
TRAFFIC		WEATHER		ROAD	
MED		HV		FG	
[X]		[X]		[X]	
DOT NUMBER		PASSENGER (16 OR MORE)		YES	
[X]		[X]		[X]	
CNV		HZ MT		DOT NUMBER	
[X]		[X]		[X]	
THE ABOVE NAMED DEFENDANT IS CHARGED WITH VIOLATING:					
[X] 66-8-102 NMSA 1978 [] STATUTE OR [] ORDINANCE & SECTION:					
COMMON NAME OF OFFENSE: <u>Driving Under the Influence of Intoxicating Liquor or Drug</u>					
ON <u>27</u> <u>JAN</u> <u>2012</u> AT <u>0955</u> HRS <u>California</u> LOCATION					
MILEPOST OR NEAREST INTERSECTION <u>Francisco De Asis</u>					
ESSENTIAL FACTS: <u>[REDACTED]</u> DISTRICT: <u>11</u>					
PRINTED OFFICER'S NAME <u>M. Luan</u> BLOOD ALCOHOL CONCENTRATION <u>0.15</u>					
OFFICER'S SIGNATURE <u>[REDACTED]</u> 10 NO SHIFT CURRENT DATE					

DISTRIBUTION

CL #
Atta
Page

MAGISTRATE/MUNICIPAL/
METROPOLITAN & DISTRICT COURT

COUNTY OF Santa NM

STATE OF NEW MEXICO
VS.

POWER NO. 003716

James Walls
Defendant

APPEARANCE PROPERTY BOND AND POWER OF ATTORNEY
Tony Madrid d/b/a/ TONY MADRID BONDING CO.
505 5th Street N.W. Albuquerque, N.M. 87102

We, James Walls as Defendant and Tony Madrid as Guarantor,
jointly and severally acknowledge ourselves bonded to the State of New Mexico in the sum of

Sixteen Hundred & no/100 - Dollars (\$ 1,600.00). Said Defendant shall
appear at all proceedings and adjournments thereof in the Municipal, Magistrate, Metropolitan and District Court that
has jurisdiction over said case. This power of Attorney guarantees that the Defendant will appear at all scheduled
proceedings. Should defendant fail to appear, Guarantor will present Defendant to the court. If the court forfeits this
bond it shall be done at the moment of non-appearance, and the court shall give notice of the forfeiture to the Guarantor
within four working days, and the court shall issue a bench warrant for the arrest of the defendant. The bail bond posted
in this case shall be null, and void upon finding of guilt thereof.

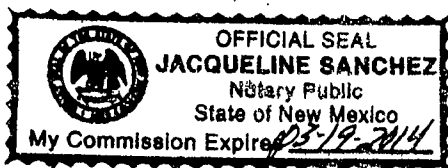
This Power of Attorney can be used only to guarantee the appearance of the defendant, and shall not be used
for any other purpose.

The Guarantor, Tony Madrid, hereby appoints Ken Bustamante as Attorney
in Fact, and authorizes him / her to execute on behalf of the Guarantor, bonds, undertakings and contracts of indemnity
and other writings obligatory in the nature thereof.

The Guarantor's Attorney in fact is hereby authorized to insert the name of the court, name of the defendant on whose
behalf this bond was given, name of the county, court case number, bond amount, date, and other required information.

The foregoing Instrument was Acknowledged before me this 1st day of November 2010 by Tony Madrid

1 day of November, 20 10



Jacqueline Sanchez

Tony Madrid
TONY MADRID, Guarantor

Ken Bustamante
Solicitor's, Signature

Appearance Date: UPON NOTICE

Judge: Norango

Time: N/A Room: N/A

Arrest No: N/A

Offense: 66-8-102, 66-8-114 (A)

Date Bond Posted: JAN 27, 12

Case No. N/A

CL#
Attache
Page

[5-401, 6-401, 7-401, 8-401]

IN THE MAGISTRATE COURT

STATE OF NEW MEXICO

State of New Mexico

COUNTY OF SOCORRO COUNTY

No. M-52-

66-8-114
66-8-102

Judge assigned: JIM NARANJO

vs. James Walls, Defendant

ORDER SETTING CONDITIONS OF RELEASE

It is ordered that the defendant be released from custody subject to the following conditions:
(check and complete applicable alternatives)

- ☒ Personal recognizance.
☒ Unsecured appearance bond of \$_____
☒ Third party custodian: _____ (Name)
☒ Secured bond of \$ 160.00 _____ (Address)
☐ Cash at % of a bond
☒ Bail bond executed on Form 9-304
☐ Property bond executed on Form 9-304
☒ I agree to appear before the court when notified at 102 WINKLER ST, SOCORRO, NM 87801 and thereafter at such times and places required in this case by any court. I further agree:
☒ Not to possess firearms, ammunition or dangerous weapons;
☒ Not to possess or consume alcohol or illegal drugs or enter liquor establishments;
☒ Not to violate and federal, state or local criminal law;
☒ To notify the court of any change of address;
☒ To maintain contact with my attorney;
☒ To avoid all contact with the alleged victim(s) or anyone who may testify in this case;
☒ Not to leave the State of NM without prior permission of the Court;
☒ To provide breath, blood or urine for testing upon request of a certified law enforcement officer;
☒ APPEAR UPON NOTICE TO magistrate court in Socorro

Judicial approval of conditions:

Dated: _____

Evangel Maldonado
(Judge) (Clerk)

Defendant's approval of conditions: I UNDERSTAND THE ABOVE CONDITIONS OF RELEASE AND AGREE TO THEM. If I fail to appear or if I violate a condition of release, I understand that bond will be forfeited and I agree to pay the amount of the bond to the state. I understand that additional criminal charges may be filed if I violate conditions of release.

Dated: 1-27-12

Bond received by: Madrid Bails Bond

Released by: Roberta Gonzales

Time of release: 0445

James Walls
Defendant's signature

Address (print)

CHICAGO, IL 60643

City, State and Zip Code (print)

Telephone Number

CL #

Attac

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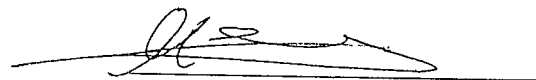
missed heel to toe, James raised his arms, James took the wrong number of steps, James stopped walking, and James made an improper turn. The next test in the SFST's is the one leg stand. James exhibited three clues in the one leg stand. James swayed while balancing, James used his arms for balance and James put his foot down during the test.


After probable cause that James was under the influence of intoxicated liquor or drug due to his performance on the standardized field sobriety test and other factors I placed James under arrest for DWI. I read James the New Mexico implied consent act and James agreed to be tested. I checked James Mouth at 0116 hours and noticed no substance was within. James submitted two breath samples into the Ir-8000 which was working in normal manner. James test resulted in 0.15, 0.16. the test was taken at 0141 hours. I then took James to the Socorro general Hospital where blood was drawn. James was then read and explained to the revocation of his license. James signed the document. James was then booked into the Socorro county detention center where he was booked.

Contrary to section(s): COUNT I: 66-8-102 COUNT II 66-8-114

NMSA, 1978

I swear or affirm under penalty of perjury that the facts set forth above are true to the best of my information and belief. I understand that it is a criminal offense subject to the penalty of imprisonment to make a false statement in a criminal complaint.


Complainant


Title (If any)

Approved

This Complaint may not be filed without the prior payment of a filing fee unless approved by the District Attorney or a law enforcement officer authorized to serve an Arrest or Search Warrant. Approval of the District Attorney or a law enforcement officer is not otherwise required.

[As amended, effective September 1, 1990; April 1, 1991; November 1, 1991]

CL # _____
Attac _____
Page _____

[5-201, 6-201, 7-201, 8-202]

STATE OF NEW MEXICO

IN THE MAGISTRATE COURT

COUNTY OF SOCORRO

STATE OF NEW MEXICO
V.

No. M-0052-_____

Date Filed: _____
(OFFICER): M. Lyon
AGENCY CASE #: 120127

NAME: James Walls

ADDRESS: _____

DOB: _____ HT: 5'10" WT: 185

SOC: _____ EYES: BRO HAIR: BLK

CRIMINAL COMPLAINT

COUNT I: **Driving under the influence of intoxicating liquor or drugs (1st offense)**

COUNT II: **careless driving**

(Common name of or offenses)

The undersigned, under penalty of perjury complains and says that on or about the 27TH day of January 2012, in the County Of Socorro, State Of New Mexico the above-named defendant(s) did: (here state the essential facts)

COUNT I: did drive a vehicle or motor vehicle while under the influence of intoxicating liquor or drugs; OR IN THE ALTERNATIVE, -

Count II: did operate a vehicle on a highway without giving his full time and entire attention to the operation of the vehicle, contrary to NMSA 1978, § 66-08-114(A). (a Motor Vehicle Code misdemeanor)

On January 27th 2012 at about 0055 hours I was on patrol in the city of Socorro, county of Socorro, state of New Mexico in a fully marked patrol car displaying my badge of office. I noticed a silver in color Mitsubishi heading north on California street. Seconds later I heard loud noise which sounded like a vehicle crash. I noticed the silver in color Mitsubishi had hit a light poll in the center median of California street. I turned around and blocked off the street. At that time the driver now known as James Walls stepped out of the driver seat. I asked James if he was ok? and James said yes. I noticed James had slurred speech and his eyes were red. I could also smell alcohol coming from James.

The vehicle was cleared from the intersection and the poll was removed. I asked James if he had consumed any alcohol tonight and James said about four beers. I then advised James that I was going to perform the standardized field sobriety test on him. The first test in the SFST's is the HGN. I advised James to follow my finger with his eyes and his eyes only. As I started the test James started to follow my finger with his head. This happen two times before James finally started following it with his eyes only. James showed all six clues in the HGN. the next test in the SFST's is the walk and turn. I asked James if he had any problems doing any walking or balancing test and James said no. I noticed James exhibited seven clues in the walk and turn. James could not keep his balance during the instructional phase. James stepped off line, James

CL# _____
Attach _____
Page _____

2032917 3

State of New Mexico
Taxation & Revenue Department
MOTOR VEHICLE DIVISION

NOTICE OF REVOCATION

Este documento es muy importante. Si no entiende
ni lee ingles, por favor, haga que se lo traduzcan.



MICROFILM NUMBER, DO NOT WRITE, STAPLE OR PUNCH ABOVE THIS LINE
STATE OF NEW MEXICO
COUNTY OF: Sacramento COUNTY CODE: 25A03 **DWI CITATIO**
CITY OF: Sacramento MVD-10811
REV. 04/05

NAME (LAST)		(FIRST)		(M)
WALLS		JAMES		
ADDRESS				
[REDACTED]				
CITY		STATE	ZIP CODE	
Chicago		IL	60643	
DRIVER LICENSE NUMBER		STATE	EXPIRES	CLASS
[REDACTED]		IL	6-11-14	DM
DATE OF BIRTH		AGE	SEX	HEIGHT
[REDACTED]		43	M	5'10
WT		SOCIAL SECURITY NUMBER		
185		[REDACTED]		
ENDORSEMENTS		NONE		

I. NOTICE OF REVOCATION: YOUR DRIVING PRIVILEGES WILL BE REVOKED IN TWENTY (20) DAYS.

Request for Hearing: You may request a hearing on this revocation. The request must be made in writing within ten (10) days from date of service of this notice. **If you do not request a hearing**, your driver license and/or driving privilege is hereby revoked, pursuant to the Implied Consent Act (Section 66-8-111 NMSA 1978), effective twenty (20) days from receipt of this notice.

Revocation Duration Information and Hearing Request instructions are explained on the back side of this form.

II. TEMPORARY DRIVER LICENSE: If you are validly licensed in New Mexico, this document will serve as your temporary license for 20 days. **If you request a hearing**, this period will be extended until otherwise ordered by the hearing officer. If you are licensed in another state this notice does not affect your license itself, but only your privilege to drive in New Mexico.

III. LAW ENFORCEMENT OFFICER'S STATEMENT

I hereby swear or affirm that on the 27 day of JAN, 2012, I arrested the above-named person based on my reasonable grounds to believe that he/she had been driving a motor vehicle ☐ commercial motor vehicle while under the influence of intoxicating liquor or drugs in the County of Sacramento, New Mexico. Details of said grounds are specified below.

REASON FOR STOP: Crash

BASIS FOR CONCLUSION THAT PERSON WAS DRIVING: ☒ SAW PERSON DRIVING ☐ PERSON ADMITTED DRIVING

☐ OTHER: _____

BASIS FOR CONCLUSION THAT PERSON WAS UNDER INFLUENCE:

☒ ODOR OF ALCOHOL ☒ BLOODSHOT, WATERY EYES ☒ SLURRED SPEECH ☐ DRIVER'S ADMISSION

☐ PERFORMANCE ON FIELD SOBRIETY TESTS, (OPTIONAL) DESCRIBE FIELD TESTS: _____

☐ OTHER INFORMATION: _____

☐ REFUSED TEST - The above-named person was asked to submit to a chemical test to determine his/her blood or breath alcohol content and, after being advised that failure to submit to a chemical test could result in the revocation of his/her driver's license and/or driving privileges in New Mexico, refused to submit to such a chemical test. ☐ ACTIONS ☐ WORDS: (OPTIONAL)

☒ SUBMITTED TO TEST - All references to alcohol concentration are as defined in Section 66-8-110(E), NMSA 1978.

☒ BREATH TEST - The above-named person submitted to a breath test and the test result indicated an alcohol concentration of eight one hundredths or more in the person's breath if the driver is 21 years of age or older or an alcohol concentration of two one hundredths or more if the person is less than 21 years of age or an alcohol concentration of four one hundredths or more and the person was driving a commercial motor vehicle. The actual test result was .15 / .16.

☐ BLOOD TEST - The above-named person submitted to a blood test and the test result was received from the laboratory on (date) _____. The test result indicated the person had an alcohol concentration of eight one hundredths or more in the person's blood if the driver is 21 years of age or older or an alcohol concentration of two one hundredths or more if the person is less than 21 years of age or an alcohol concentration of four one hundredths or more and the person was driving a commercial motor vehicle. The actual test result was _____.

SERVICE - I personally served a copy of this document on the person named above on this ____ day of _____, 20 ____.

DECLARATION - I hereby declare under the penalty of perjury that the information given in this statement is true and correct to the best of my knowledge.

Printed Arresting Officer's Name & ID Number U. Lyon #306

Officer's Agency and Agency Code SPD 25A03

Arresting Officer's Signature [Signature]

Name and Agency of every other Officer who should be subpoenaed to any hearing requested, including officer who administered test, if different from arresting officer (Full name, ID No & agency): _____

I received the Notice of Revocation on 01-27-12,
Date

Law enforcement officer check one of these statements if applicable:

☐ Driver unable to sign

☐ Driver refused to sign

CPD 0064295



Rabbi Emanuel
Mayor

Department of Police • City of Chicago
3510 South Michigan Avenue • Chicago, Illinois 60653

Garry F. McCarthy
Superintendent of Police

30 JAN 2012

TO: Director of Records - City of Socorro Police Department
407 Center Street
Socorro, NEW MEXICO 87801 Contact # (575) 835-1883

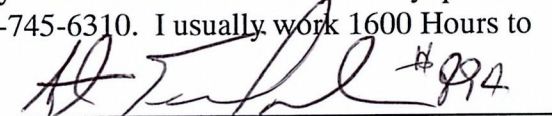
FROM: Sergeant Terrance COCHRAN
Chicago Police Department
Bureau of Internal Affairs - General Investigation Section
3510 South Michigan 5th floor
Chicago, ILLINOIS 60653 FAX # (312) 745-6931

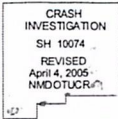
SUBJECT: Data Inquiry

Pursuant to Complaint Log Investigation Number #1051500, involving the arrest of (Off-Duty) Chicago Police Officer [REDACTED] on 26 JAN 2012 for D.U.I. and other traffic offenses by (On-Duty) Officer(s) from your agency, the Reporting Sergeant is requesting copies of the following documentation, if permissible by your agency's policy and available:

1. Copies of any and all Case / Incident / Traffic Crash Reports involving this incident. 1201 27 A 1201 27 T A
2. Copies of any and all Arrest Reports / related Booking paperwork – photos for Officer [REDACTED]
3. Copies of any and all citations / D.U.I. Warning to Motorist – Statutory Summary Suspension documents issued to the Accused or to be used in the criminal case.

These items will be used in an Administrative investigation by the Chicago Police Department Internal Affairs Division. Thank you in advance for your assistance and that of your staff in this matter. If you need any further information or have any questions, please feel free to contact at my office number 312-745-6310. I usually work 1600 Hours to 0030 Hours Monday thru Friday. Thanks again.


Sergeant Terrance COCHRAN Star #894
Chicago Police Department
Bureau of Internal Affairs



STATE OF NEW MEXICO

REPORTING DEPARTMENT

<input type="checkbox"/> ON PRIVATE PROPERTY		<input type="checkbox"/> FATAL	<input type="checkbox"/> UNDER \$500		Case Number: 120127TA	
<input type="checkbox"/> INJURY		<input checked="" type="checkbox"/> PROPERTY DAMAGE ONLY	<input checked="" type="checkbox"/> \$500 OR MORE		NMDOT:	
DATE OF CRASH M/D/YR: 1-27-12		MILITARY TIME: 0055		CITY OCCURRED IN: Socorro		COUNTY: Socorro
OCCURRED ON: (Route No. or Name) Highway 9		AT INTERSECTION WITH: Francisco D. Avila				TRIBAL LAND? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
OTHER LOCATION: <input type="checkbox"/> FEET <input type="checkbox"/> MILES		PERMANENT LANDMARK - COUNTY LINE - INTERSECTION - MILEPOST				LAT: LONG:
CRASH OCCURRED <input checked="" type="checkbox"/> On Roadway <input type="checkbox"/> Off Roadway		CLASSIFICATION <input type="checkbox"/> Overtaken <input type="checkbox"/> Rollover <input type="checkbox"/> Other N-Col <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other Vehicle <input type="checkbox"/> Vehicle on Other Rdwy <input type="checkbox"/> Parked Vehicle <input type="checkbox"/> Fixed Object <input type="checkbox"/> Other Object				ANALYSIS CODE: 24
VEHICLE NO. 1 HEADED: N <input checked="" type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> On: California 9		Posted Speed: 35		Safe Speed: 35		
Driver's License Number: [REDACTED] State: NV Type: D Restrictions: None Expires: 2014		Address: [REDACTED]		Phone: [REDACTED]		
Date of Birth - M/D/YR: [REDACTED]		Occupation: [REDACTED]		Age: 43 Sex (M/F): M Race: B Injury Code: 06 OP Code: 6		
Seat Pos: [REDACTED]		Occupant's Name: [REDACTED]		Occupant's Address (City, State, Zip): 43MB D66 N - -		
Vehicle Yr: 2011 Vehicle Make: MITZ Color: SIL Body Style: 4dr		Vehicle Use (1): P Vehicle Use (2): P		Towed? <input type="checkbox"/> Yes <input type="checkbox"/> No		
License Yr: NV License Plate Number: [REDACTED] VIN: [REDACTED]		Towed due to disabling damage? <input type="checkbox"/> Yes <input type="checkbox"/> No		Overall Vehicle Damage: <input type="checkbox"/> Heavy <input type="checkbox"/> Moderate <input type="checkbox"/> Slight <input type="checkbox"/> None		
US DOT: [REDACTED] ICC Docket #: [REDACTED]		Interstate Carrier? <input type="checkbox"/> Yes <input type="checkbox"/> No		Extent: <input type="checkbox"/> Disabled <input type="checkbox"/> Functional <input type="checkbox"/> Appearance <input type="checkbox"/> Property <input type="checkbox"/> Fire <input type="checkbox"/> None		
Number of Axles: [REDACTED] Gross Vehicle Weight Rating/Gross Combination Weight Rating: <input type="checkbox"/> < or = 10,000 lbs <input type="checkbox"/> 10,001 to 26,000 <input type="checkbox"/> > 26,000		Hazmat Placard 4 digit #: [REDACTED] OR Hazmat Name: [REDACTED]		AND 1 digit #: [REDACTED] Hazmat Released? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Carrier's Name: EAH HOLDING LLC		Carrier's Address: [REDACTED]		Carrier's Zip: [REDACTED]		
Owner's Name: ENTERPRISE LEASING CO.		Owner's Address: [REDACTED]		Owner's Zip: [REDACTED] Owner's Telephone: [REDACTED]		
Insured By: (Name of Company) [REDACTED] Policy Number: [REDACTED]		Liability Insurance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Trailer or Towed vehicles: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Vehicle Yr: [REDACTED] Vehicle Make: [REDACTED] Color: [REDACTED] Body Style: [REDACTED]		Vehicle Use (1): [REDACTED] Vehicle Use (2): [REDACTED]		Towed? <input type="checkbox"/> Yes <input type="checkbox"/> No		
License Yr: [REDACTED] License Plate Number: [REDACTED] VIN: [REDACTED]		Towed due to disabling damage? <input type="checkbox"/> Yes <input type="checkbox"/> No		Overall Vehicle Damage: <input type="checkbox"/> Heavy <input type="checkbox"/> Moderate <input type="checkbox"/> Slight <input type="checkbox"/> None		
US DOT: [REDACTED] ICC Docket #: [REDACTED]		Interstate Carrier? <input type="checkbox"/> Yes <input type="checkbox"/> No		Extent: <input type="checkbox"/> Disabled <input type="checkbox"/> Functional <input type="checkbox"/> Appearance <input type="checkbox"/> Property <input type="checkbox"/> Fire <input type="checkbox"/> None		
Number of Axles: [REDACTED] Gross Vehicle Weight Rating/Gross Combination Weight Rating: <input type="checkbox"/> < or = 10,000 lbs <input type="checkbox"/> 10,001 to 26,000 <input type="checkbox"/> > 26,000		Hazmat Placard 4 digit #: [REDACTED] OR Hazmat Name: [REDACTED]		AND 1 digit #: [REDACTED] Hazmat Released? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Carrier's Name: [REDACTED]		Carrier's Address: [REDACTED]		Carrier's Zip: [REDACTED]		
Owner's Name: [REDACTED]		Owner's Address: [REDACTED]		Owner's Zip: [REDACTED] Owner's Telephone: [REDACTED]		
Insured By: (Name of Company) [REDACTED] Policy Number: [REDACTED]		Liability Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No		Trailer or Towed vehicles: <input type="checkbox"/> Yes <input type="checkbox"/> No		

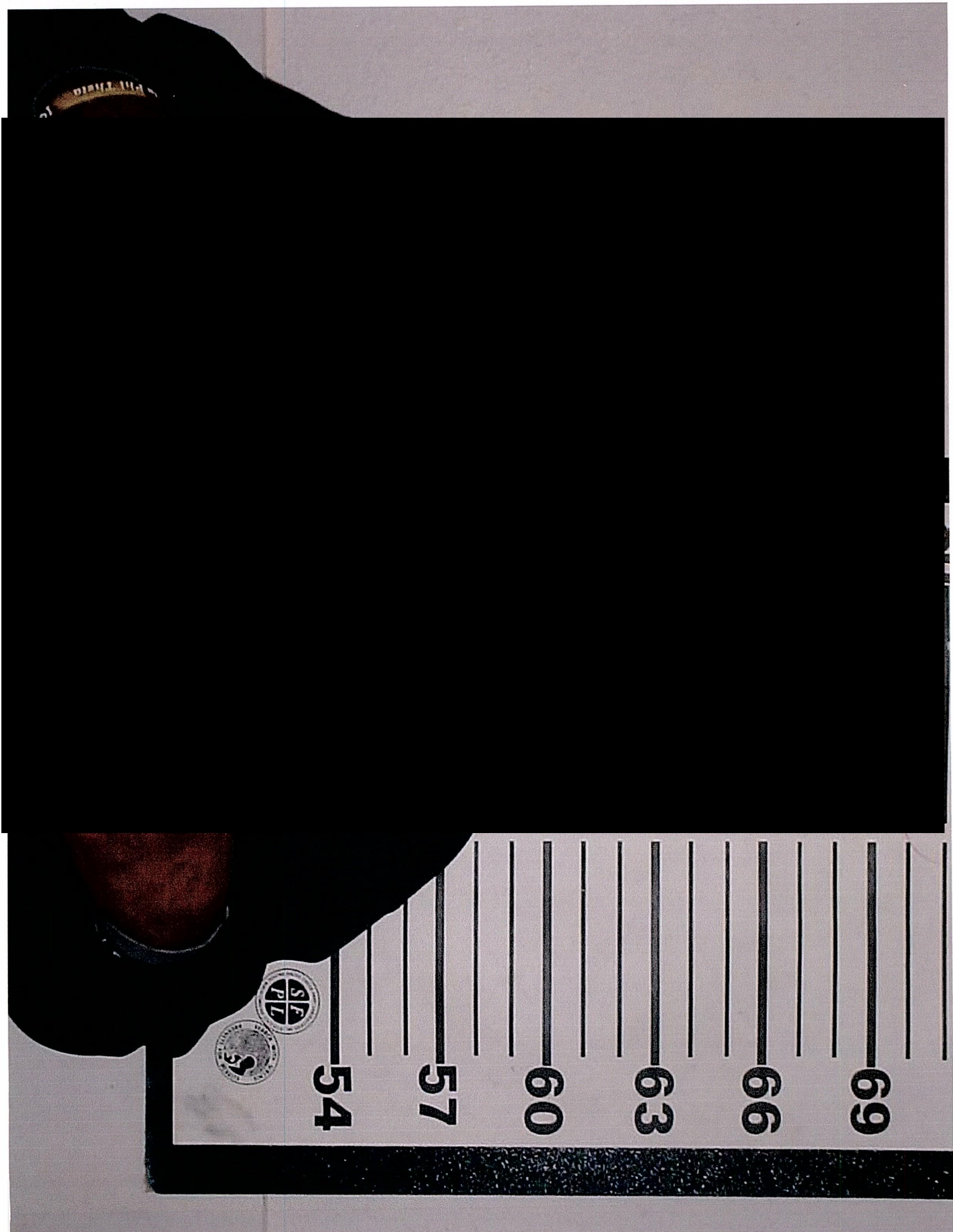
STATE OF NEW MEXICO UNIFORM CRASH REPORT
ISSUING AGENCY COPY

SHEET OF 1 SHEETS 2

CPD 0064297

ROAD - WEATHER	LIGHTING (Mark 1 with X) <input type="checkbox"/> Daylight <input type="checkbox"/> Dawn <input type="checkbox"/> Dusk <input checked="" type="checkbox"/> Dark Lighted <input type="checkbox"/> Dark-Not Lighted <input type="checkbox"/> Other and not stated	WEATHER (Mark 1 with X) <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Raining <input type="checkbox"/> Snowing <input type="checkbox"/> Fog <input type="checkbox"/> Dust <input type="checkbox"/> Wind <input type="checkbox"/> Other <input type="checkbox"/> Sleet or Hail	ROAD COND (Mark 1 each with X) V1 V2 <input checked="" type="checkbox"/> Dry <input type="checkbox"/> Wet <input type="checkbox"/> Snow <input type="checkbox"/> Ice <input type="checkbox"/> Loose Material <input type="checkbox"/> Standing or Moving Water <input type="checkbox"/> Slush	ROAD SURFACE (Mark 1 each with X) V1 V2 <input type="checkbox"/> Paved <input type="checkbox"/> Unstripped <input type="checkbox"/> Paved Center Stripe <input checked="" type="checkbox"/> Paved Center & Edge line <input type="checkbox"/> Unpaved	TRAFFIC CONTROL (Mark 1 each with X) V1 V2 <input type="checkbox"/> No Passing Zone <input type="checkbox"/> Stop Sign <input type="checkbox"/> Traffic Signals <input type="checkbox"/> Yield Sign <input type="checkbox"/> R.R. Gate <input type="checkbox"/> 4 Way Stop <input type="checkbox"/> Flashers <input checked="" type="checkbox"/> No Controls <input type="checkbox"/> Other	ROAD CHARACTER (Mark 1 with X) <input checked="" type="checkbox"/> Straight <input type="checkbox"/> Curve GRADE (Mark 1 with X) <input checked="" type="checkbox"/> Level <input type="checkbox"/> Hillcrest <input type="checkbox"/> On Grade <input type="checkbox"/> Dip	CRASH REPORT NUMBER: [REDACTED] CASE NUMBER: [REDACTED]			
	APPARENT CONTRIBUTING FACTORS (Mark 1 or more for each with X)						WHAT DRIVERS WERE DOING (Mark 1 or more for each with X)		ROAD DESIGN (Mark 1 or more for each with X)	
EVENT	V1 V2 <input type="checkbox"/> Excessive Speed <input type="checkbox"/> Speed too fast for conditions <input type="checkbox"/> Failed to yield right of way <input type="checkbox"/> Passed stop sign <input type="checkbox"/> Disregarded traffic signal <input type="checkbox"/> Drove left of center <input type="checkbox"/> Improper overtaking <input type="checkbox"/> Avoid no contact vehicle <input type="checkbox"/> Avoid no contact - other <input type="checkbox"/> Cell Phone <input type="checkbox"/> Low Visibility due to smoke		V1 V2 <input type="checkbox"/> Following too closely <input type="checkbox"/> Made improper turn <input checked="" type="checkbox"/> Driver inattention <input type="checkbox"/> Under influence of alcohol <input type="checkbox"/> Other improper driving <input type="checkbox"/> Pedestrian error <input type="checkbox"/> Inadequate brakes <input type="checkbox"/> Driverless moving vehicle <input type="checkbox"/> Failed to yield-Police Vehicle(s) <input type="checkbox"/> Failed to yield-Emergency Veh(s) <input type="checkbox"/> Under the Influence of Drugs or Narcotics <input type="checkbox"/> High speed pursuit		V1 V2 <input type="checkbox"/> Defective steering <input type="checkbox"/> Defective tires <input type="checkbox"/> Other mechanical defect <input type="checkbox"/> Road defect <input type="checkbox"/> Other No driver error <input type="checkbox"/> Traffic control not functioning <input type="checkbox"/> Improper lane change <input type="checkbox"/> Improper backing <input type="checkbox"/> None <input type="checkbox"/> Vehicle Skidded Before Brake		V1 V2 <input type="checkbox"/> Going Straight <input type="checkbox"/> Overtaking - Passing <input type="checkbox"/> Right Turn <input type="checkbox"/> Left Turn <input type="checkbox"/> U Turn <input type="checkbox"/> Slowing <input type="checkbox"/> Backing		SEQUENCE OF EVENTS (See event codes) V1 V2 <div style="border: 1px solid black; padding: 2px;">07C</div> <div style="border: 1px solid black; padding: 2px;">FIRST EVENT</div> <div style="border: 1px solid black; padding: 2px;">SECOND EVENT</div> <div style="border: 1px solid black; padding: 2px;">THIRD EVENT</div> <div style="border: 1px solid black; padding: 2px;">FOURTH EVENT</div>	
	DRIVER OR PEDESTRIAN SOBRIETY (Mark 1 or more for each with X) D1 D2 <input checked="" type="checkbox"/> Consumed Alcohol <input type="checkbox"/> Consumed a Controlled Substance <input type="checkbox"/> Had Not Consumed Alcohol <input type="checkbox"/> Sobriety Unknown <input type="checkbox"/> Consumed Medication <input type="checkbox"/> Tested by Instrument <input type="checkbox"/> Field Sobriety Test <input type="checkbox"/> Eye Gaze/Nystagmus <input type="checkbox"/> Breath Test Administered <input checked="" type="checkbox"/> Blood Test Administered		DRIVER OR PEDESTRIAN PHYSICAL CONDITION (Mark 1 or more for each with X) D1 D2 <input type="checkbox"/> Fatigue-Asleep <input type="checkbox"/> Eyesight Imp. <input type="checkbox"/> Hearing Imp. <input type="checkbox"/> Ill (Sick) <input type="checkbox"/> Medication <input type="checkbox"/> Amputee <input checked="" type="checkbox"/> No App. Defects <input type="checkbox"/> *Other Physical Impairment		PEDESTRIAN ACTION At Intersection P1 P2 <input type="checkbox"/> With Signal <input type="checkbox"/> Against Signal <input type="checkbox"/> No Signal <input type="checkbox"/> Diagonal		Not at Intersection P1 P2 <input type="checkbox"/> From Behind Obstruction <input type="checkbox"/> No Crosswalk <input type="checkbox"/> Crosswalk <input type="checkbox"/> Walking W/Traffic <input type="checkbox"/> *Other		P1 P2 <input type="checkbox"/> Walking Against Traffic <input type="checkbox"/> Standing <input type="checkbox"/> Pushing or Working on Vehicle <input type="checkbox"/> Playing in Road	
	Describe what happened - refer to vehicles by number. <div style="font-family: cursive; font-size: 1.2em;"> VEH # 1 TRAVELING NORTH ON CALIFORNIA ST. VEH # 1 STRUCK LIGHT POLE ON MEDIAN. VEH # 1 SUSTAINED DAMAGE TO FRONT OF V.H. POLE WAS COMPLETELY KNOCKED DOWN. DRIVER ARRESTED DWI - </div>									
	Use Diagram/Narrative Sheet for additional information									
OTHER PROPERTY INVOLVED	DESCRIPTION OF PROPERTY AND DAMAGE									
	Owner's Name		Owner's Address			Owner's Zip Code		Owner's Telephone		
WITNESS	NAME		AGE	ADDRESS			TELEPHONE			
ENFORCEMENT ACTION	VEH. NO.	NAME			VIOLATION (COMMON NAME)			ACTION		
	1	[REDACTED]			Careless Driving			<input checked="" type="checkbox"/> Booked <input checked="" type="checkbox"/> Cited <input type="checkbox"/> Pending		
								<input type="checkbox"/> Booked <input type="checkbox"/> Cited <input type="checkbox"/> Pending		
								<input type="checkbox"/> Booked <input type="checkbox"/> Cited <input type="checkbox"/> Pending		
Time Notified		Time Arrived		Notified By		Supervisor at Scene		Checked By		
0855		0855		OFFICER						
Officer's Signature		Print Officer's Name			Rank		ID No.	District	Date of Report	
[Signature]		MIAI LUNA			PMT		306	11	1-27-12	
CRASH REPORT [REDACTED] STATE OF NEW MEXICO UNIFORM CRASH REPORT CASE NUMBER [REDACTED] ISSUING AGENCY COPY								SHEET OF SHEETS 2 2		

THIS REPORT MAY CONTAIN OPINIONS AND OBSERVATIONS OF THE INVESTIGATING OFFICER



PROPERTY	PROPERTY STATUS		1-STOLEN 2-STOLEN & RECOVERED 3-RECOVERED (STOLEN THIS JURIS.)		4-RECOVERED (STOLEN OTHER JURIS.) 5-EVIDENCE 6-LOST		7-FOUND 8-COUNTERFEIT/FORGED 9-DAMAGED/DESTROYED/VANDALIZED		10-BURNED 11-SEIZED 12-USED IN CRIME		13-SAFEKEEPING 14-UNKNOWN 15-EMBEZZLED															
	PROPERTY TYPE		02-ALCOHOL 04-BICYCLES 06-CLOTHES/FURS 07-COMPUTER HARDWARE/SOFTWARE 08-CONSUMABLE GOODS 09-CREDIT/DEBIT CARDS 10-DRUGS/NARCOTICS 11-DRUG/NARCOTIC EQUIPMENT		12-FARM EQUIPMENT 13-FIREARMS 14-GAMBLING EQUIPMENT 15-HEAVY CONSTRUCTION/INDUSTRIAL EQUIP. 16-HOUSEHOLD GOODS 17-JEWELRY/PRECIOUS METALS 18-LIVESTOCK 19-MERCHANDISE		20-MONEY 21-NEGOTIABLE INSTRUMENTS 22-NON-NEGOTIABLE INSTRUMENTS 23-OFFICE EQUIPMENT 25-PURSES/HANDBAGS/WALLETS 26-RADIO/TVS/VCRs 27-RECORDINGS-AUDIO/VISUAL 29-STRUCTURES-SINGLE OCCUPANCY		30-STRUCTURES-OTHER DWELLINGS 31-STRUCTURES-OTHER COMM./BUSINESS 32-STRUCTURES-INDUSTRIAL/MANUF. 33-STRUCTURES-PUBLIC/COMMUNITY 34-STRUCTURES-STORAGE 35-STRUCTURES-OTHER 36-TOOLS 38-VEHICLE PARTS/ACCESSORIES		40-SKIS/SKI EQUIPMENT 77-OTHER 88-PENDING INVENTORY 99-SPECIAL CATEGORY															
	DRUG TYPE		A-CRACK B-COCAINE C-HASHISH		D-HEROIN E-MARIJUANA F-MORPHINE		G-OPIUM H-OTHER NARCOTICS I-LSA		J-PCP K-OTHER HALLUCINOGENS L-AMPH/METHAM.		M-OTHER STIMULANTS N-BARBITURATES O-OTHER DEPRESSANTS		P-OTHER DRUGS U-UNKNOWN X-OVER 3 TYPES													
	FIELD UNIT OF MEASURE		GM-GRAM		KG-KILOGRAM		OZ-OUNCE		LB-POUND		GL-GALLON		NP-NO. PLANTS													
					LT-LITER		FO-FLUID OUNCE		DU-DOSAGE UNITS		ML-MILLILITER															
PROPERTY	1-PROPERTY STATUS	PROPERTY TYPE	TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE (EXCEPT DRUGS)															
	SUSPECTED DRUG TYPE	QUANTITY/UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)				SERIAL / OAN		DATE RECOVERED		NIC NO.															
	2-PROPERTY STATUS	PROPERTY TYPE	TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE (EXCEPT DRUGS)															
	SUSPECTED DRUG TYPE	QUANTITY/UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)				SERIAL / OAN		DATE RECOVERED		NIC NO.															
	3-PROPERTY STATUS	PROPERTY TYPE	TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE (EXCEPT DRUGS)															
	SUSPECTED DRUG TYPE	QUANTITY/UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)				SERIAL / OAN		DATE RECOVERED		NIC NO.															
	4-PROPERTY STATUS	PROPERTY TYPE	TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE (EXCEPT DRUGS)															
	SUSPECTED DRUG TYPE	QUANTITY/UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)				SERIAL / OAN		DATE RECOVERED		NIC NO.															
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="8">M.O. EVENT CODES: (AGENCY OPTIONAL USE)</td> <td colspan="2">TOTAL VALUE STOLEN \$</td> <td colspan="2">TOTAL VALUE REC. \$</td> <td colspan="2">ADD. ON SUPP.</td> </tr> </table>												M.O. EVENT CODES: (AGENCY OPTIONAL USE)								TOTAL VALUE STOLEN \$		TOTAL VALUE REC. \$		ADD. ON SUPP.	
	M.O. EVENT CODES: (AGENCY OPTIONAL USE)								TOTAL VALUE STOLEN \$		TOTAL VALUE REC. \$		ADD. ON SUPP.													
	SYNOPSIS	See attached narrative.																								
NARRATIVE																										
CERT. / STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES	NO	"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE		X		DATE															
	REPORTING OFFICER (PRINT)		M. Ly on		RANK	PRM		I.D. NO.	306		DATE	01/27/12														
	ASSISTING OFFICER (PRINT)				RANK			I.D. NO.			DATE															
	APPROVING OFFICER (PRINT)				RANK			I.D. NO.			DATE															
	DETECTIVE / FOLLOW-UP OFFICER / REFERRED TO				I.D. NO.				DATE																	
	PROCESSED BY				DATE				DATA ENTRY PERSON																	
INCIDENT STATUS		UNFOUNDED CLEARED BY ARREST CLEARED EXCEPTIONALLY		EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED		D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE		DATE																
CASES CLEARED BY THIS ARREST				CASE NO.				CASE NO.																		
CASE NO.				REV.		1/94																				

SOCORRO POLICE DEPARTMENT

DATE: 01/27/2012

CASE # [REDACTED]

On January 27th 2012 at about 0055 hours I was on patrol in the city of Socorro, county of Socorro, state of New Mexico in a fully marked patrol car displaying my badge of office. I noticed a silver in color Mitsubishi heading north on California street. Seconds later I heard loud noise which sounded like a vehicle crash. I noticed the silver in color Mitsubishi had hit a light poll in the center median of California street. I turned around and blocked off the street. At that time the driver now known as [REDACTED] stepped out of the driver seat. I asked [REDACTED] if he was ok? and [REDACTED] said yes. I noticed [REDACTED] had slurred speech and his eyes were red. I could also smell alcohol coming from [REDACTED]

The vehicle was cleared from the intersection and the poll was removed. I asked [REDACTED] if he had consumed any alcohol tonight and [REDACTED] said about four beers. I then advised [REDACTED] that I was going to perform the standardized field sobriety test on him. The first test in the SFST's is the HGN. I advised [REDACTED] to follow my finger with his eyes and his eyes only. As I started the test [REDACTED] started to follow my finger with his head. This happen two times before [REDACTED] finally started following it with his eyes only. [REDACTED] showed all six clues in the HGN. the next test in the SFST's is the walk and turn. I asked [REDACTED] if he had any problems doing any walking or balancing test and [REDACTED] said no. I noticed [REDACTED] exhibited seven clues in the walk and turn. [REDACTED] could not keep his balance during the instructional phase. [REDACTED] stepped off line, [REDACTED] missed heel to toe, [REDACTED] raised his arms, [REDACTED] took the wrong number of steps, [REDACTED] stopped walking, and [REDACTED] made an improper turn. The next test in the SFST's is the one leg stand. [REDACTED] exhibited three clues in the one leg stand. [REDACTED] swayed while balancing, [REDACTED] used his arms for balance and [REDACTED] put his foot down during the test.

After probable cause that [REDACTED] was under the influence of intoxicated liqueur or drug due to his performance on the standardized field sobriety test and other factors I placed [REDACTED] under arrest for DWI. I read [REDACTED] the New Mexico implied consent act and [REDACTED] agreed to be tested. I checked [REDACTED] Mouth at 0116 hours and noticed no substance was within. [REDACTED] submitted two breath samples into the Ir-8000 which was working in normal manner. [REDACTED] test resulted in 0.15, 0.16. the test was taken at 0141 hours. I then took [REDACTED] to the Socorro general Hospital where blood was drawn. [REDACTED] was then read and explained to the revocation of his license. [REDACTED] signed the document. [REDACTED] was then booked into the Socorro county detention center where he was booked.


PATROLMEN

M. Lyon

[5-201, 6-201, 7-201, 8-202]

STATE OF NEW MEXICO

COUNTY OF SOCORRO

IN THE MAGISTRATE COURT

STATE OF NEW MEXICO
V.

FILED IN
SOCORRO CO.

JAN 27 2012

No. M-0052-_____

Date Filed: _____
(OFFICER): M. Lyon
AGENCY CASE #: _____

MAGISTRATE COURT

STN: 280100 12 0033

CRIMINAL COMPLAINT

COUNT I: **Driving under the influence of intoxicating liquor or drugs (1st offense)**

COUNT II: **careless driving**

(Common name of or offenses)

The undersigned, under penalty of perjury complains and says that on or about the 27TH day of January 2012, in the County Of Socorro, State Of New Mexico the above-named defendant(s) did: (here state the essential facts)

COUNT I: did drive a vehicle or motor vehicle while under the influence of intoxicating liquor or drugs; OR IN THE ALTERNATIVE, -

Count II: did operate a vehicle on a highway without giving his full time and entire attention to the operation of the vehicle, contrary to NMSA 1978, § 66-08-114(A). (a Motor Vehicle Code misdemeanor)

On January 27th 2012 at about 0055 hours I was on patrol in the city of Socorro, county of Socorro, state of New Mexico in a fully marked patrol car displaying my badge of office. I noticed a silver in color Mitsubishi heading north on California street. Seconds later I heard loud noise which sounded like a vehicle crash. I noticed the silver in color Mitsubishi had hit a light poll in the center median of California street. I turned around and blocked off the street. At that time the driver now known as [REDACTED] stepped out of the driver seat. I asked James if he was ok? and [REDACTED] said yes. I noticed [REDACTED] had slurred speech and his eyes were red. I could also smell alcohol coming from [REDACTED]

The vehicle was cleared from the intersection and the poll was removed. I asked [REDACTED] if he had consumed any alcohol tonight and [REDACTED] said about four beers. I then advised [REDACTED] that I was going to perform the standardized field sobriety test on him. The first test in the SFST's is the HGN. I advised [REDACTED] to follow my finger with his eyes and his eyes only. As I started the test [REDACTED] started to follow my my finger with his head. This happen two times before [REDACTED] finally started following it with his eyes only. [REDACTED] showed all six clues in the HGN. the next test in the SFST's is the walk and turn. I asked [REDACTED] if he had any problems doing any walking or balancing test and [REDACTED] said no. I noticed [REDACTED] exhibited seven clues in the walk and turn. [REDACTED] could not keep his balance during the instructional phase. [REDACTED] stepped off line [REDACTED]

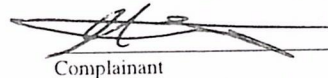
missed heel to toe, [REDACTED] raised his arms, [REDACTED] took the wrong number of steps, [REDACTED] stopped walking, and [REDACTED] made an improper turn. The next test in the SFST's is the one leg stand. [REDACTED] exhibited three clues in the one leg stand, [REDACTED] swayed while balancing, [REDACTED] used his arms for balance and [REDACTED] put his foot down during the test.

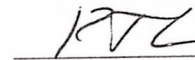
After probable cause that [REDACTED]'s walls was under the influence of intoxicated liqueur or drug due to his performance on the standardized field sobriety test and other factors I placed [REDACTED] under arrest for DWI. I read [REDACTED] the New Mexico implied consent act and [REDACTED] agreed to be tested. I checked [REDACTED] Mouth at 0116 hours and noticed no substance was within. [REDACTED] submitted two breath samples into the Ir-8000 which was working in normal manner. [REDACTED] test resulted in 0.15, 0.16. the test was taken at 0141 hours. I then took [REDACTED] to the Socorro general Hospital where blood was drawn. [REDACTED] was then read and explained to the revocation of his license. [REDACTED] signed the document. [REDACTED] was then booked into the Socorro county detention center where he was booked.

Contrary to section(s): COUNT I: 66-8-102 COUNT II: 66-8-114

NMSA, 1978

I swear or affirm under penalty of perjury that the facts set forth above are true to the best of my information and belief. I understand that it is a criminal offense subject to the penalty of imprisonment to make a false statement in a criminal complaint.


Complainant


Title (If any)

Approved

This Complaint may not be filed without the prior payment of a filing fee unless approved by the District Attorney or a law enforcement officer authorized to serve an Arrest or Search Warrant. Approval of the District Attorney or a law enforcement officer is not otherwise required.

[As amended, effective September 1, 1990; April 1, 1991; November 1, 1991.]

2032917 3

State of New Mexico
Taxation & Revenue Department
MOTOR VEHICLE DIVISION

NOTICE OF REVOCATION

este documento es muy importante. Si no entiende
lo lee en ingles, por favor, haga que se lo traduzcan.



MICROFILM NUMBER, DO NOT WRITE, STAPLE OR PUNCH ABOVE THIS LINE
STATE OF NEW MEXICO
COUNTY OF: Sacramento COUNTY CODE: 25403 DWI CITATION
CITY OF: Sacramento MVD-10811
REV. 04/05

I. NOTICE OF REVOCATION: YOUR DRIVING PRIVILEGES WILL BE REVOKED IN TWENTY (20) DAYS.

Request for Hearing: You may request a hearing on this revocation. The request must be made in writing within ten (10) days from date of service of this notice.

If you do not request a hearing, your driver license and/or driving privilege is hereby revoked, pursuant to the Implied Consent Act (Section 66-8-111 NMSA 1978), effective twenty (20) days from receipt of this notice.

Revocation Duration Information and Hearing Request Instructions are explained on the back side of this form.

II. TEMPORARY DRIVER LICENSE: If you are validly licensed in New Mexico, this document will serve as your temporary license for 20 days.

If you request a hearing, this period will be extended until otherwise ordered by the hearing officer. If you are licensed in another state this notice does not affect your license itself, but only your privilege to drive in New Mexico.

III. LAW ENFORCEMENT OFFICER'S STATEMENT

I hereby swear or affirm that on the 27 day of JAN, 20 12, I arrested the above-named person based on my reasonable grounds to believe that he/she had been driving a motor vehicle ☐ commercial motor vehicle while under the influence of intoxicating liquor or drugs in the County of Sacramento, New Mexico. Details of said grounds are specified below.

REASON FOR STOP: Crash

BASIS FOR CONCLUSION THAT PERSON WAS DRIVING: ☒ SAW PERSON DRIVING ☒ PERSON ADMITTED DRIVING

☐ OTHER: _____

BASIS FOR CONCLUSION THAT PERSON WAS UNDER INFLUENCE:

☒ ODOR OF ALCOHOL ☒ BLOODSHOT, WATERY EYES ☒ SLURRED SPEECH ☒ DRIVER'S ADMISSION

☐ PERFORMANCE ON FIELD SOBRIETY TESTS, (OPTIONAL) DESCRIBE FIELD TESTS: _____

☐ OTHER INFORMATION: _____

☐ REFUSED TEST - The above-named person was asked to submit to a chemical test to determine his/her blood or breath alcohol content and, after being advised that failure to submit to a chemical test could result in the revocation of his/her driver's license and/or driving privileges in New Mexico, refused to submit to such a chemical test. ☐ ACTIONS ☐ WORDS: (OPTIONAL) _____")

☒ SUBMITTED TO TEST - All references to alcohol concentration are as defined in Section 66-8-110(E), NMSA 1978.

☒ BREATH TEST - The above-named person submitted to a breath test and the test result indicated an alcohol concentration of eight one hundredths or more in the person's breath if the driver is 21 years of age or older or an alcohol concentration of two one hundredths or more if the person is less than 21 years of age or an alcohol concentration of four one hundredths or more and the person was driving a commercial motor vehicle. The actual test result was .15 / .16.

☐ BLOOD TEST - The above-named person submitted to a blood test and the test result was received from the laboratory on (date) _____. The test result indicated the person had an alcohol concentration of eight one hundredths or more in the person's blood if the driver is 21 years of age or older or an alcohol concentration of two one hundredths or more if the person is less than 21 years of age or an alcohol concentration of four one hundredths or more and the person was driving a commercial motor vehicle. The actual test result was _____.

SERVICE - I personally served a copy of this document on the person named above on this _____ day of _____, 20 ____.

DECLARATION - I hereby declare under the penalty of perjury that the information given in this statement is true and correct to the best of my knowledge.

H. Lyon #366
Printed Arresting Officer's Name & ID Number

SPD 25403
Officer's Agency and Agency Code

[Signature]
Arresting Officer's Signature

Name and Agency of every other Officer who should be subpoenaed to any hearing requested, including officer who administered test, if different from arresting officer (Full name, ID No & agency): _____

received the Notice of Revocation on 01-27-12

Date

CPD 0064305

Abuse, Neglect and Misuse of Personal Property

Presbyterian Healthcare Services is committed to providing patient care in a safe environment. Any patient, family member, legal guardian or employee may report an incident of abuse, neglect or misuse of personal property to any Presbyterian Healthcare Services employee or directly to the New Mexico Department of Health, Division of Health Improvement. Reports can be made to the Division of Health Improvement by telephone call, written correspondence or utilizing the New Mexico Department of Health, Division of Health Improvement incident report form. Patients, family members, legal guardians and employees should feel free to make reports to Presbyterian Healthcare Services or state agencies without fear of retaliation. As required by state law, Presbyterian Healthcare Services maintains an incident management system in order to ensure a timely response and identify quality improvement opportunities related to suspected patient abuse, neglect, or misuse of personal property.

New Mexico Department of Health Improvement incident report forms are available in the Admitting/Registration area at all facilities. Reports can also be made by calling, faxing or e-mail per below.

Child Protective Services

Phone 1-800-797-3260

Fax 1-505-841-6691

Adult Protective Services

Phone 1-866-654-3219

Fax 1-505-476-4913

New Mexico Department of Health Improvement (NMDHI)

- NMDHI Hotline 1-800-752-8649

- Fax 1-888-576-0012

- E-mail incident.management@state.nm.us

- Online Form at http://dhi.health.state.nm.us/imb/imb_form.php

I have received the above information and understand that copies of the New Mexico Department of Health incident form are available at Admissions/Registration or upon request.

The undersigned certifies the foregoing statements and consents were read and understood. The undersigned is the patient or is duly authorized as the patient's representative to execute and accept its terms.

[Signature]

Witness


Patient (or Authorized Representative/ Relationship to Patient)

Guarantor (or Authorized Representative/ Relationship to Patient)

1/27/12
Date

0315
Time

If patient is unable to sign state reason: _____

☐ Interpreter used - Printed Name _____

2032917 3

ABSTRACT OF RECORD

COURT DOCKET NO.	
HEARING DATE	COUNSEL REQUESTED
	COUNSEL WAIVED
COUNSEL NAME	
ADDRESS	
CITY STATE ZIP CODE	
PLEA OF DEFENDANT	<input type="checkbox"/> NOLO <input type="checkbox"/> GUILTY <input type="checkbox"/> NOT GUILTY
COURT FINDING:	<input type="checkbox"/> GUILTY <input type="checkbox"/> NOT GUILTY <input type="checkbox"/> DISMISSED
<input type="checkbox"/> NOLLE PROSEQUI	
SENTENCE OF COURT:	
<input type="checkbox"/> FINE \$ _____	Suspended Amt. \$ _____ (IF ANY)
<input type="checkbox"/> JAIL _____ DAYS	Suspended Days _____ (IF ANY)
LAB FEES	BOND FORFEIT
\$ _____	\$ _____
REMARKS	
<input type="checkbox"/> DWI SCHOOL	
THIS IS A CORRECT ABSTRACT OF COURT ACTION FOR DEFENDANT AND OFFENSE SHOWN.	
SIGNATURE OF MAGISTRATE OR JUDGE	
PRINTED NAME OF MAGISTRATE OR JUDGE	
NAME OF COURT	DATE
ADDRESS	POST OFFICE
DISTRIBUTION	
OFFICER TO FORWARD THIS COPY TO THE COURT, COURT TO COMPLETE ABSTRACT OF RECORD ABOVE AND MAIL THIS COPY TO THE MOTOR VEHICLE DIVISION, DRIVER SERVICES BUREAU, DWI SECTION, P.O. BOX 1028, SANTA FE, NEW MEXICO 87504-1028.	
ABSTRACT COPY	



MICROFILM NUMBER, DO NOT WRITE, STAPLE OR PUNCH ABOVE THIS LINE

STATE OF NEW MEXICO
 COUNTY OF: Socorro
 CITY OF: Socorro

COUNTY CODE: 25A03
 MVD-10811
 REV. 04/05

DWI CITATION

VEH. DRIVER INFORMATION

COND.

CITATION

COURT INFO.

CMV	<input type="checkbox"/> YES	<input type="checkbox"/> NO	PASSENGER (16 OR MORE)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
HZ MT	<input type="checkbox"/> YES	<input type="checkbox"/> NO	DOT NUMBER		
THE ABOVE NAMED DEFENDANT IS CHARGED WITH VIOLATING:					
<input checked="" type="checkbox"/> 66-8-102 NMSA 1978			<input type="checkbox"/> STATUTE OR ORDINANCE & SECTION: _____		
COMMON NAME OF OFFENSE: <u>Driving Under the Influence of Intoxicating Liquor or Drug</u>					
ON	<u>27</u>	<u>JAN</u>	<u>2012</u>	AT	<u>0055</u> HRS <u>California</u>
	DAY	DATE		MILITARY TIME	LOCATION
MILEPOST OR NEAREST INTERSECTION <u>Francisco De Avenda</u>					
DISTRICT: <u>11</u>					
ESSENTIAL FACTS: <u>H. & L. Light poll.</u>					
PRINTED OFFICER'S NAME			BLOOD ALCOHOL CONCENTRATION		
<u>M. Lyon</u>			<u>.15 / .16</u>		
OFFICER'S SIGNATURE			ID. NO.	SHIFT	CURRENT DATE
<u>[Signature]</u>			<u>306</u>	<u>MID</u>	<u>01-27-12</u>
YOU ARE TO APPEAR IN			COURT		
<input type="checkbox"/> MAGISTRATE			<input type="checkbox"/> MUNICIPAL		
<input type="checkbox"/> METROPOLITAN			<input type="checkbox"/> OTHER: _____		
ADDRESS <u>102 Winkler Socorro, NM 87801</u>					
ON OR BEFORE <u>FEB 27</u> 20 <u>12</u> AT <u>9:00</u> (AM) PM _____					



SOCORRO POLICE DEPT.
COUNTY OF SOCORRO

COUNTY CODE

AGENCY CODE

STATE OF NEW MEXICO
UNIFORM TRAFFIC CITATION

Y ☒ LP ☒ E A B C Y ☒ Y ☒
TRAFFIC WEATHER ROAD LIGHT ACCIDENT
☒ LT MD HV ☒ CL FG RN SN DS ☒ W I S LT DS ☒ DK ☒ Y N

☐ STATUTE 66-7-301 ☐ CZ ☐ STATUTE 66-5-205 ☒ STATUTE ☐ ORDINANCE
SPEEDING NO INSURANCE 66-8-114
☐ MPH IN A ☐ ZONE ☐ RH ☐ STATUTE 66-7-372
DATE LOCATION IDENTIFICATION DISTRICT MILE POST
01 27 12 0055 306 11 CITY
CALIFORNIA
OFFICER'S PRINTED NAME OFFICER'S SIGNATURE
M. Lyon

ESSENTIAL FACTS

Driver was involved in crash
Hit poll.

☐ PENALTY ASSESSMENT: I acknowledge my guilt of the offense charged and my options as explained to me by the officer. I agree to remit by mail the penalty assessment of \$.00
OFFICER MAY NOT ACCEPT PAYMENT

☐ TRAFFIC ARRAIGNMENT: You are hereby ordered to appear in METROPOLITAN COURT

on _____, 20____ at _____ PM
My failure to appear will result in the issuance of a warrant for my arrest, my license being suspended and I will be required to pay an additional \$100.00 warrant fee. I acknowledge receipt of this citation and without admitting guilt, I will appear as ordered.

☒ COURT APPEARANCE: I acknowledge receipt of this notice and without admitting guilt agree to appear in
MAGISTRATE METRO MUNICIPAL or TRIBAL court.

Address 102 Winkler Socorro NM 87801
on (or by) FEB 27, 2012 at 9:00 AM

☐ WARNING NOTICE: I acknowledge receipt of this notice and agree that a violation of the law has been committed. No further action is required.

X Hooper
Signature Agree to the above marked determination.

COURT COPY

[illegible]

PATIENT NOTE

LACERATIONS
CUTS, ABRASIONS, BURNS

- ## HEAD INJURY

- ## CONTUSIONS, FRACTURES, SPRAINS

- ## BACK & NECK INJURIES

- ## MEDICATION

OTHER INSTRUCTIONS

GENERAL INSTRUCTIONS

I'M AWARE THE MEDICATION
ADMINISTERED BY ME IS NOT IN
A CHILD-PROOF CONTAINER

X-RAY

- RETURN TO E.R. IF WORSE
IN ANY WAY OR CALL 835-1140

SIGNATURE PATIENT OR REPRESENTATIVE

DATE _____

WITNESS

PATIENT IDENTIFICATION

Narr


PRESBYTERIAN

White Copy – EMERGENCY

Canary Copy – PATIENT

Pink Copy – PRIVATE PHYSICIAN

2117 (Rev. 12/02)
Page 1 of 1

CPD 0064309



SOCORRO POLICE DEPARTMENT VEHICLE TOWING AUTHORIZATION AND INVENTORY

Date 1-27 2012 Day 5/16 Time 12:07
TOWING AUTHORIZATION

I Hereby Order Lesebergs Telephone 835-4107
(Wrecker)

Address 512 Hh 60 Socorro
(Street) (City)

To Remove From California St.
(Location)

Reason For Tow DWI / wreck. Reason For Hold _____

You Are Further Instructed To: Hold- Contact Undersigned Officer prior to releasing
X Release Vehicle Upon Proper Proof Of Ownership

Registered Owner EAN Holding LLC

Owner Address _____

Officer Signature

Wrecker Operator Signature

VEHICLE

Year Model 2011 Make Mitsubishi Body Style 4 door Color Gry.

Lic Yr. 11 Lic. State NV Lic. No. _____ VIN _____

Vehicle Damage (If Any) front of car.

(List visible body and glass damage)

CONTENTS AND ACCESSORIES

YES NO

YES NO

YES NO

YES NO

Keys In Veh. Y C.B. Radio N Spare Tire Y Trlr. Hitch N

Am/Fm Radio Y Heater Y Lug Wrench Y Mag. Wheel N

Tape/CD Y Spotlight N Jack Y Aux. Lights N

Other Contents: _____

(List Vehicle contents, luggage, clothing, tools, etc)

OWNER/AGENT RELEASE

Notice: No vehicle impounded by the Socorro Police Department will be released from storage until the owner or his agent produces Satisfactory proof of ownership in the form of title or registration certificate regardless of the original reason for towing.

Date Released: _____ 20 _____ Time _____ By: _____

Released To: _____ Address: _____
City: _____ State: _____

COPIES: White - Court Copy
Yellow - State (UCR)
Pink - Arrest File
Golden - Jail

ARREST/BOOKING REPORT

AGENCY <i>SP1</i>		ORI NM		CASE NUMBER		FILE NUMBER		FILE							
DEFENDANT NAME (Last, First, Middle) <i>WALLS JAMES</i>		FBI		RACE <i>SM</i>		SEX <i>M</i>		DATE OF BIRTH <i>01/27/12</i>		P.O.B. <i>USA</i>		DOCKET NO.			
AGE <i>510</i>		HEIGHT <i>185</i>		WEIGHT <i>180</i>		HAIR <i>BLK</i>		EYES <i>BLU</i>		SOC. SEC. NO. <i>[REDACTED]</i>		SCARS & MARKS		SID NO.	
ALIASES		DRIVER'S LICENSE NUMBER		PHONE NO.		STATE		LOCATION OF ARREST <i>CALIFORNIA</i>		DATE & TIME <i>01/27/12 0858</i>		OCCUPATION OR EMPLOYER		ARRESTING OFFICER (Signature & Number) <i>[Signature] #306</i>	
BOOKING OFFICER (Signature & Number) <i>[Signature] #306</i>		FINGERPRINTED & PHOTOGRAPHED BY: (Name & Number) <i>Nº 21425</i>		Charge ID		A		B		C		Charge		<i>DW I - 66-8-102</i>	
Statute				Statute				Statute				Bond Amount			
Bond Type				Bond Type				Bond Type				Return Date			
Disposition				Disposition				Disposition				Disposition			
Sentence				Sentence				Sentence				Sentence			
Time Served				Time Served				Time Served				Time Served			
Good Time				Good Time				Good Time				Good Time			
Balance				Balance				Balance				Balance			
Paid				Paid				Paid				Paid			
Receipt Number				Receipt Number				Receipt Number				Receipt Number			
KNOWN HISTORY OF:		Alcoholism <i>N</i>		Mental Illness <i>N</i>		Drug Abuse <i>N</i>		ANY KNOWN ALLERGIES:		Diabetes <i>N</i>		Epilepsy <i>N</i>		High Blood Pressure <i>N</i>	
Is Subject Now Under Doctor's Care, and/or, Taking Any Medication?		<i>No</i>		If Yes, What?				UNDER INFLUENCE OF:		Alcohol		Drugs		If Yes, What Drug?	
RELEASE DATE		TIME		RELEASING OFFICER (Signature & Number)		AGENCY RELEASED TO:									

SIGNATURE OF RECEIVING OFFICIAL: *Robert Gonzalez*

LIST ANY REMARKS BELOW

DEFENDANT'S PERSONAL PROPERTY RECEIPT

Total Cash At Time Of Arrest

\$ *179.93*

DEFENDANT'S NAME (Please Print)

QTY	ITEM	QTY	ITEM
1	V.S. card		
1	15/16 wallet		
1	16/16 hat		

x *[Signature]*
DEFENDANT'S SIGNATURE AT TIME OF ARREST

WITNESS

I Hereby state that the above listed property was returned to me, in satisfaction of all claims to property on my person at the time of my arrest. On the date of my release.

x

CPD 0064311





Operator's Signature

CASE SUBMISSION SHEET

LAST NAME					
ADDRESS					
SEX <u>M</u> <input checked="" type="checkbox"/> <u>X</u> F <input type="checkbox"/> RACE <u>R</u> HEIGHT <u>5'10</u> WEIGHT <u>185</u> HAIR <u>BLK</u> EYES <u>BLU</u>					

1 CRIME & STATUE <u>DWI 66-8-102</u> DATE & TIME OF CRIME <u>01-27-12 0055</u> LOCATION OF CRIME <u>Cal. Bornia</u>	2 CRIME & STATUE <u>Careless Driving</u> DATE & TIME OF CRIME <u>66-8-114</u> LOCATION OF CRIME <u>SAME</u>
---	---

3 CRIME & STATUE DATE & TIME OF CRIME LOCATION OF CRIME	4 CRIME & STATUE DATE & TIME OF CRIME LOCATION OF CRIME
---	---

5 CRIME & STATUE DATE & TIME OF CRIME LOCATION OF CRIME	6 CRIME & STATUE DATE & TIME OF CRIME LOCATION OF CRIME
---	---

WITNESSES

1 FIRST NAME _____ LAST NAME _____ VICTIM _____ PRELIM _____ MAILING ADDRESS _____ TRIAL _____ PHYSICAL ADDRESS _____ PHONE # _____ PARENT INFO 2 FIRST NAME _____ LAST NAME _____ VICTIM _____ PRELIM _____ MAILING ADDRESS _____ TRIAL _____ PHYSICAL ADDRESS _____ PHONE # _____ PARENT INFO 3 FIRST NAME _____ LAST NAME _____ VICTIM _____ PRELIM _____ MAILING ADDRESS _____ TRIAL _____ PHYSICAL ADDRESS _____ PHONE # _____	1 FIRST NAME _____ LAST NAME _____ VICTIM _____ PRELIM _____ MAILING ADDRESS _____ TRIAL _____ PHYSICAL ADDRESS _____ PHONE # _____ PARENT INFO 2 FIRST NAME _____ LAST NAME _____ VICTIM _____ PRELIM _____ MAILING ADDRESS _____ TRIAL _____ PHYSICAL ADDRESS _____ PHONE # _____ PARENT INFO 3 FIRST NAME _____ LAST NAME _____ VICTIM _____ PRELIM _____ MAILING ADDRESS _____ TRIAL _____ PHYSICAL ADDRESS _____ PHONE # _____
--	--

CASE SUBMISSION SHEET

DEFENDANT _____

CASE OFFICER _____

Lyon

AGENCY CASE # _____

AGENCY: *SPD*

CASE STATUS: DEFENDANT IN JAIL _____ RELEASED FROM JAIL _____
PENDING ARREST _____ NEED WARRANT _____
NEED COMPLAINT ONLY _____

ITEMS PROVIDED

THE FOLLOWING ITEMS ARE INCLUDED WITH THE CASE AT THE TIME OF SUBMISSION TO THE DISTRICT ATTORNEYS OFFICE

- 1 POLICE REPORT(S) _____ ✓
- 2 SUPPLEMENTAL OR AGENCY ASSIST REPORT _____
- 3 CRIMINAL COMPLAINT _____ ✓
- 4 PROBABLE CAUSE STATEMENT _____
- 5 ARREST WARRANT / AFFIDAVIT / RETURN / INVENTORY _____
- 6 SEARCH WARRANT / AFFIDAVIT / RETURN / INVENTORY _____
- 7 HAND WRITTEN STATEMENTS _____
- 8 EVIDENCE SHEETS _____
- 9 BOOKING SHEETS _____ ✓

PENDING WRITTEN REQUEST

THE FOLLOWING ITEMS ARE PROVIDED UPON WRITTEN REQUEST ONLY

DATE REQUEST RECEIVED: _____

- 1 AUDIO / VIDEO TAPES _____ X
- 2 PHOTOGRAPHS _____
- 3 TRANSCRIPTS _____
- 4 NCIC PRINTOUTS _____
- 5 DMV PRINTOUTS _____
- 6 COURT DOCUMENTS _____

OFFICERS SIGNATURE _____

DATE SUBMITTED

01, 27, 12

LEAVE BLANK

CRIMINAL

(STAPLE HERE)

LEAVE BLANK

STATE USAGE

☐☐☐

SUBMISSION

APPROXIMATE CLASS

AMPUTATION

SCAR

TE USAGE

NATU

SOCIAL SECURITY NO.

LEAVE BLANK

SES

T NAME FIRST NAME, MIDDLE NAME, SUFFIX

NO.

STATE IDENTIFICATION NO.

DATE OF BIRTH

MM DD YY

SEX

RACE

HEIGHT

WEIGHT

EYES

HAIR

M

B

5'10

185

BLU

BLK

**FEDERAL BUREAU OF INVESTIGATION, UNITED STATES DEPARTMENT OF JUSTICE
CRIMINAL JUSTICE INFORMATION SERVICES DIVISION, CLARKSBURG, WV 26306**

PRIVACY ACT OF 1974 (PL. 93-579) REQUIRES THAT FEDERAL, STATE, OR LOCAL AGENCIES INFORM INDIVIDUALS WHOSE SOCIAL SECURITY NUMBER IS REQUESTED WHETHER SUCH DISCLOSURE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH SOLICITATION, AND USES WHICH WILL BE MADE OF IT.

JUVENILE FINGERPRINT SUBMISSION YES <input type="checkbox"/>		DATE OF ARREST MM DD YY 01-27-12		ORI CONTRIBUTOR NM-10280100 ADDRESS PD SOCORRO, NM STN: 280100 12 0033 REPLY YES <input type="checkbox"/> DESIRED?	
FINGERPRINT AS ADULT YES <input type="checkbox"/>		DATE OF OFFENSE MM DD YY 01-27-12		PLACE OF BIRTH (STATE OR COUNTRY) IL	
ADDITIONAL COPY TO: (ENTER ORI)		COUNTRY OF CITIZENSHIP USA			
MISCELLANEOUS NUMBERS		SCARS, MARKS, TATTOOS, AND AMPUTATIONS			
RESIDENCE/COMPLETE ADDRESS <div style="background-color: black; width: 100%; height: 20px;"></div>		CITY <div style="background-color: black; width: 100%; height: 20px;"></div>		STATE <div style="background-color: black; width: 100%; height: 20px;"></div>	
OFFICIAL TAKING FINGERPRINTS (NAME OR NUMBER) 306		LOCAL IDENTIFICATION/REFERENCE		PHOTO AVAILABLE? YES <input type="checkbox"/> PALM PRINTS TAKEN? YES <input type="checkbox"/>	
EMPLOYER IF U.S. GOVERNMENT, INDICATE SPECIFIC AGENCY. IF MILITARY, LIST BRANCH OF SERVICE AND SERIAL NO.				OCCUPATION	
ARREST/CITATION DWI 66-8-102				DISPOSITION 1.	
Careless Driving 66-8-114				2.	
				3.	
ADDITIONAL				ADDITIONAL	
ADDITIONAL INFORMATION/BASIS FOR CAUTION				STATE BUREAU STAMP	

MEDIATION AGREEMENT
BY AND BETWEEN CHICAGO POLICE OFFICER [REDACTED], STAR 10710,
AND THE CITY OF CHICAGO,
DEPARTMENT OF POLICE, INTERNAL AFFAIRS DIVISION

This Mediation Agreement ("Agreement") is made by and between the City of Chicago, Department of Police, Internal Affairs Division ("IAD"), and Police Officer [REDACTED] Star #10710, ("Officer"), on this 01st day of March 2012.

IAD is investigating Compliant Register No. 1051500 in which Officer has been named as the accused. Under this Agreement, IAD and Officer agree:

1. Officer agrees not to contest either the allegations of misconduct made or the IAD finding of Sustained for Complaint Register No. 1051500. As a condition of this Agreement, Officer accepts this finding and agrees to waive all administrative rights available under the Collective Bargaining Agreement between the City of Chicago and the Fraternal Order of Police, Lodge 7, applicable Chicago Police Department rules, applicable City of Chicago employee rules, Chicago Police Board rules, and any other applicable administrative rights and/or rights at law.
2. Officer agrees to accept and will not contest a penalty for a 20 day suspension from the Chicago Police Department. As a condition of this Agreement, Officer accepts this penalty and agrees to waive all administrative rights available under the Collective Bargaining Agreement between the City of Chicago and the Fraternal Order of Police, Lodge 7, applicable Chicago Police Department rules, City of Chicago employee rules, Chicago Police Board rules, and any other applicable administrative rights and/or rights at law. Officer also agrees to be evaluated by an alcohol rehabilitation program approved by the Department's Employee Assistance program; and complete a program if required.
3. The suspension will be set forth on a separate document.
4. IAD agrees to terminate its investigation into Complaint Register No. 105150 pursuant to this Agreement and will enter a Sustained finding against Officer. Officer will not be required to make a statement to an IAD Investigator.
5. Any attempt to contest either the Sustained finding and/or penalty within this Agreement will render this Agreement null and void.

I declare that I have completely read and understand the terms of this **MEDIATION AGREEMENT**, was provided the opportunity to discuss this Agreement with counsel, and freely accept the terms of this Agreement.

[REDACTED]
Police Officer [REDACTED]

Date: 1-MARCH-2012

Witness: Fraternal Order of Police, Lodge 7

By: [Signature]

Date: 3/1/12

Title: 3UP

City of Chicago, Department of Police, Internal Affairs Division

By: [Signature]

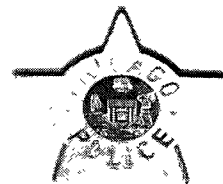
Date: 01 MAR 2012

Title: Department Advocate

Report Date: 06 Mar 2012
Report Time: 1914 Hrs

Chicago Police Department

Personnel Division



Information Services Division
Data Warehouse
Produced by [REDACTED]

**Only for active personnel*

Complimentary History

Name	Title	Star	Unit	Detail Unit	Emp Number
[REDACTED]	9161	10710	701	376	[REDACTED]

Achievements

Total No.

PRESIDENTIAL ELECTION DEPLOYMENT AWARD 2008	1
COMPLIMENTARY LETTER	1
HONORABLE MENTION	31
DEPARTMENT COMMENDATION	2
LIFE SAVING AWARD	1
OTHER AWARDS	1
2004 CRIME REDUCTION RIBBON	1
POLICE OFFICER OF THE MONTH AWARD	1
EMBLEM OF RECOGNITION - PHYSICAL FITNESS	5
ATTENDANCE RECOGNITION AWARD	2
2009 CRIME REDUCTION AWARD	1
TOTAL AWARDS	47

CR# 1051500

NOTE: THIS REPORT IS FOR OFFICIAL LAW
ENFORCEMENT / AUTHORIZED USE ONLY.
THE INFORMATION IS CURRENT AS OF THE
DATE AND TIME OF THE REPORT. THIS



Chicago Police Department
CLEAR
Citizen & Law Enforcement Analysis & Reporting

CPD 0064318

INTERNAL AFFAIRS DIVISION
RECORDS SECTION

WEDNESDAY MARCH 07 2012

TO: COMMANDING OFFICER OF UNIT 121

FROM: RECORDS SECTION
INTERNAL AFFAIRS DIVISION

SUBJECT: PREVIOUS DISCIPLINARY RECORD OF:

[REDACTED]		10710	701
NAME	(LAST, FIRST, M.I.)	STAR	UNIT
M	BLK	[REDACTED]	
SEX	RACE	EMP.#	

REFERENCE: COMPLAINT REGISTER NUMBER (S) 1051 500

THE PREVIOUS DISCIPLINARY RECORD OF THE SUBJECT ACCUSED HAS BEEN REQUESTED IN YOUR NAME BY:

SGT. MARAFFINO		2563	[REDACTED]	121
RANK	NAME	STAR	EMP#	UNIT

RELATIVE TO A SUSTAINED FINDING IN THE INVESTIGATION OF THE ABOVE REFERENCE COMPLAINT REGISTER NUMBER.

THE RECORD SECTION, INTERNAL AFFAIRS DIVISION, DISCLOSES THE FOLLOWING DISCIPLINARY ACTION (S) ADMINISTERED TO THE SUBJECT ACCUSED, FOR THE PAST FIVE (5) YEARS.

VERIFIED/PREPARED BY:

FOR: S.D.E.O Patricia JOHNSON/WALKER
COMMANDING OFFICER
RECORDS SECTION
INTERNAL AFFAIRS DIVISION

No CR History
No SPAR History

BUREAU OF INTERNAL AFFAIRS
Investigations Division
General Investigations Section

6 March 2012

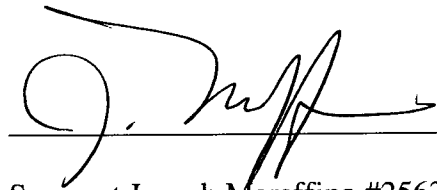
LOG #1051500

TO: Commanding Officer
Investigations Division
General Investigations Section

FROM: Sergeant Joseph Maraffino #2563
Investigations Division
General Investigations Section


SUBJECT: Approval of Complaint Log Investigation #1051500

The attached Complaint Log Investigation has been completed and is submitted for your approval.

A handwritten signature in black ink, appearing to read 'J. Maraffino', is written over a horizontal line.

Sergeant Joseph Maraffino #2563
Investigations Division
General Investigations Section

Approved:

A handwritten signature in black ink, appearing to read 'J. Ely', is written over a horizontal line.

Commanding Officer
Investigations Division
General Investigations Section

SUMMARY REPORT

CHICAGO POLICE DEPARTMENT

LOG NO
1051500

TYPE
CR

DATE OF REPORT
06-MAR-2012

TO: DEPUTY SUPERINTENDENT, BUREAU OF PROFESSIONAL STANDARDS
ATTENTION: CHIEF, INTERNAL AFFAIRS DIVISION

FROM - INVESTIGATOR'S NAME	RANK	STAR NO	EMPLOYEE NO	UNIT ASSIGNED	UNIT DETAILED
MARAFFINO, JOSEPH	9171	2563		121	

REFERENCE NOS.(LIST ALL RELATED C.L., C.B., I.R., INVENTORY NOS., ETC., PERTINENT OF THIS INVESTIGATION)

INCIDENT ADDRESS:	DATE / TIME: 26-JAN-2012 22:01	BEAT: 0
-------------------	--------------------------------	---------

ACCUSED

NAME	RANK	STAR NO	EMP NO	UNIT ASSIGNED	UNIT DETAILED	SEX/RACE	DOB	APPOINTED DATE	ON DUTY ?	SWORN ?
	9161	10710		701	376	M / BLK		14-AUG-2000	NO	YES

REPORTING PARTY

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
CLARK, THOMAS	RANK: 9173, STAR NO: 270, EMP NO:			M / WHI	2 52

VICTIMS

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
------	----------	------------	-----------	------------	-----------

WITNESSES

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
------	----------	------------	-----------	------------	-----------

* IF CPD MEMBER, LIST RANK, STAR, EMPLOYEE NOS. IN ADDRESS, PAX/BELL IN TELEPHONE BOX

ALLEGATIONS

** SEE LAST PAGE FOR INSTRUCTIONS FOR STATING ALLEGATIONS, AND COMPLETING THE REMAINDER OF THE SUMMARY REPORT.

Complaint Log type is classified as CR sworn affidavit not required.

ALLEGATION # It is alleged that the accused officer was involved in a traffic crash on 27 January 2012 in the city of Socorro New Mexico at 0055 hours and was arrested for DUI. The accused had a BAC level of 0.15 and was subsequently arrested by the Socorro New Mexico Police Dept..

INSTRUCTIONS FOR THE SUMMARY REPORT

AFTER COMPLETING THE FORM, CONTINUE THE SUMMARY REPORT ON 8 1/2 x 11 INCH WHITE PAPER.

ALLEGATIONS

In narrative form, state how, when, where, and by whom the complaint was received. State the date, time, and location where the incident occurred, and summarize the complaint. If more than one allegation is made, enumerate each allegation as follows:

- No. 1 (Summarize the allegation)
- No. 2 (Summarize the allegation)

2. EVIDENCE

Number and attach all statements, reports, and other evidence gathered, on the lower right hand corner. The Complaint Log number must also be entered on the lower right hand corner of each attachment. Following are numbered (EXAMPLES ONLY).

Attachments:

- No. 1 Face Sheet - Yellow
- No. 2 Letter of complaint from victim
- No. 3 Statement of victim
- No. 4 Statement of witness (give name)
- No. 5 Report of member (give name)
- No. 6 Statement of member (give name)
- No. 7 Progress report of investigator (give name)
- No. 8 Copy of certified letter to reporting party
- No. 9 Copy of Alcoholic Influence Report (accused)
- No. 10 General Offense Case Report, R.D. _____
- No. 11 Signed Sworn Affidavit

3. INVESTIGATION

In narrative form, indicate the fact-finding processes followed and the information ascertained as a result of the investigation. Whenever reference is made to an attachment, indicate the attachment number.

4. FINDINGS

Each allegation must be classified as either of the following:
Unfounded - Exonerated - Not Sustained - Sustained - No Affidavit.

If the classification is "Sustained," indicate the rule number violated, the context of the rule, and how the rule was violated by the member.

Example: Allegation No. 1. Unfounded
Allegation No. 1. Sustained - Violation of Rule 12, Failure to wear the uniform as prescribed, in that on 27 Feb 84 the accused was found to be wearing a non-prescribed short sleeve shirt.

Even though the original allegation(s) may be Unfounded, etc., the investigation may uncover a violation of serious nature unrelated to the original complaint, in which case disciplinary action should be recommended for the other violation.

Example: Allegation No. 1. Unfounded
Allegation No. 2. Not Sustained Other violation: Sustained-Violation of Rule 26, Failure to provide the Department with a current address and telephone number, in that the accused related in his statement that he had moved and obtained a new telephone number and he had failed to provide this information to the Department.

SUMMARY OF PREVIOUS DISCIPLINARY ACTIONS and RECORD OF PREVIOUS COMPLIMENTARY HISTORY IN SUSTAINED CASES ONLY, copies of the accused member's Summary of Previous Disciplinary Actions and Record of Previous Complimentary History will be included as attachments to the final investigation report, Refer to the General Order entitled "Complaint and Disciplinary Procedures."

5. RECOMMENDATION FOR DISCIPLINARY ACTION

One (overall) recommendation for disciplinary action will be made by the investigator. The recommendation will be for all sustained findings; recommendations will not be made for each sustained allegation

Examples: 1. Violation noted, no disciplinary action warranted.
2. That the accused member be reprimanded.
3. That the accused member be suspended for days
4. That the accused member be separated from the Department.

6. DATE INITIATED: (Date complaint was received for investigation)

7. DATE COMPLETED: (Date of this report)

8. ELAPSED TIME: (Total time, expressed in days)

(Investigator)			
Rank	Name	Star No.	Unit

9. APPROVALS

The investigator will initiate the Command Channel Review form (CPD-44. 113-A) by completing the Investigator section.

BUREAU OF INTERNAL AFFAIRS
Investigations Division
General Investigations Section

6 March 2012

LOG #1051500

SUMMARY:

Upon receiving this assignment for investigation the undersigned reviewed the Initiation report prepared and submitted by Lt. Thomas Clark #270 of Unit 701. (attachment #4). Lt. Clark states that he was contacted by P/O [REDACTED] and informed that [REDACTED] had been in a traffic accident and arrested for DUI in Socorro New Mexico.

In the synoptic submitted by Sgt. Cochran #894 of BIA he states that he relieved P/O [REDACTED] of his police powers and served him with the appropriate forms (attachment #5).

On 01 March 2012 the undersigned relieved a package from the Socorro Police Department. That package contained copies of all the Socorro Police Department reports and tickets related to the DUI arrest of P/O [REDACTED] (attachment #6).

A copy of P/O [REDACTED] Complimentary History (attachment #8) and Disciplinary History (attachment #9) are attached including a copy of the mediation form signed by P/O [REDACTED] FOP Representative Daniel Gorman, and Department Advocate Sgt. Mahoney (attachment #7).

Based on the fact that the accused P/O [REDACTED] and the Chicago Police Department came to an agreement, this case was mediated with a SUSTAINED finding.

FINDINGS:

Accused #1: Police Officer P/O [REDACTED] #10710, employee number [REDACTED]

Allegation #1:

SUSTAINED- Violation of Department Rule #1, "Violation of any law or ordinance" in that on 26 January 2012 you were arrested for DUI and Damage to Property in Socorro New Mexico.

SUSTAINED- Violation of Department Rule #2, "Any action or conduct which impedes the Department's effort to achieve its policy and goals or brings discredit on the Department" in that on 26 January 2012 you were arrested for DUI and Damage to Property in Socorro New Mexico.

BUREAU OF INTERNAL AFFAIRS
Investigations Division
General Investigations Section

6 March 2012

LOG #1051500

SUSTAINED- Violation of Department Rule #15, “Intoxication on or off duty” in that on 26 January 2012 you were arrested for DUI and Damage to Property in Socorro New Mexico.

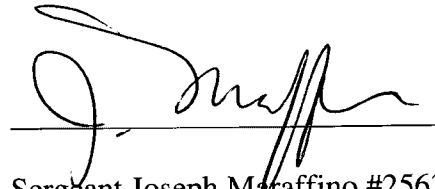
RECOMMENDATION:

Based on the “SUSTAINED” findings of the investigation, and after reviewing the complimentary history and disciplinary history of Police Officer [REDACTED] #10710, employee number [REDACTED] the mediation agreement declares that P/O [REDACTED] be given a **SUSPENSION OF 20 DAYS.**

Date Initiated: 01 February 2012

Date Completed: 06 March 2012

Elapsed Time: 34 Days

A handwritten signature in black ink, appearing to read 'J. Maraffino', is written over a horizontal line.

Sergeant Joseph Maraffino #2563
General Investigations Section
Internal Affairs Division

Attachments

Add Attachment

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content?	Approve Inclusion?	Comments
View	1	FACE SHEET	N/A			TOPPINS, YOLANDA	27-JAN-2012 09:26		[EDIT]		
View	2	CONFLICT CERTIFICATION	N/A			MARAFFINO, JOSEPH	01-FEB-2012 20:59		[EDIT]		
View	3	SWORN AFFIDAVIT FROM COMPLAINANT	N/A	1	YES	MARAFFINO, JOSEPH	02-MAR-2012 18:27	APPROVED	[EDIT]	YES	
View	4	INITIATION REPORT	N/A	1	NO	MARAFFINO, JOSEPH	02-MAR-2012 18:40	APPROVED	[EDIT]	YES	
View	5	IAD SYNOPSIS REPORT	N/A	16	YES	MARAFFINO, JOSEPH	02-MAR-2012 18:35	APPROVED	[EDIT]	YES	
View	6	ALCOHOL AND DRUG TEST OIS FORMS/RESULTS	N/A	21	YES	MARAFFINO, JOSEPH	02-MAR-2012 18:55	APPROVED	[EDIT]	YES	
View	7	MEDIATION REQUEST REPORT	N/A	1	YES	MARAFFINO, JOSEPH	06-MAR-2012 21:29	APPROVED	[EDIT]	YES	
View	8	COMPLIMENTARY HISTORY	N/A	1	YES	MARAFFINO, JOSEPH	06-MAR-2012 21:29	APPROVED	[EDIT]	YES	
View	9	DISCIPLINARY HISTORY	N/A	1	YES	MARAFFINO, JOSEPH	07-MAR-2012 20:23	APPROVED	[EDIT]	YES	